P13000001388

(Re	questor's Name)					
(Address)						
(Ad	dress)					
(Cit	y/State/Zip/Phone	e #)				
PICK-UP	MAIT	MAIL				
(Bu	siness Entity Nan	ne)				
(Document Number)						
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						
		<u></u>				





400266636474

11/24/14--01008--004 **35.00

14 NOV 24 AH 9: 05

DIVISION OF CORPORATIONS

C. Lewis 14

TRANSMITTAL LETTER

SUBJECT: VAMTEL IN C (Name of Corporation)
(Name of Corporation)
DOCUMENT NUMBER: P1300001388
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for fili
Please return all correspondence concerning this matter to the following:
(Name of Person)
(Name of Person)
(Name of Firm/Company)
(Name of Firm/Company)
13405 5 W 128 5T 203-B (Address)
MIAMI_ FL 33186 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (786) 395 2229 (Area Code & Daytime Telephone Number
(Area code de Daytime Telephone Pullion

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED SEURLTARY OF STATE DIVISION OF CORPORATIONS

14 HOV 24 AM 9: 05

,	JUAN	MORA	, hereby res	ign as	Y. P	
					(Title)	
of	VA	MTEK	1HC			
		(Name of Co	orporation)			
	Document Number, if	, u	corporation organi	zed under	the laws of the Sta	ate of
	7-20 RI	DA.				
			·			
		Lucia	900	wa		

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314