

P13000048399

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

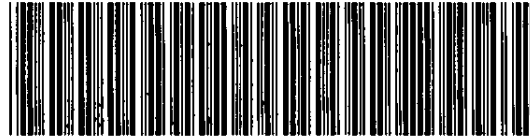
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000285310510

05/12/16--01005--

CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

2016 MAY 12 P 2:06

FILED

MAY 13 2016
T. LEMIEUX

CD

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: US WHOLEFOODS INC
(Name of Corporation)

DOCUMENT NUMBER: 713000048399

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JUAN J. POLI

(Name of Person)

—
(Name of Firm/Company)

4151 NW 2ND AVE

(Address)

MIAMI FL 33127

(City/State and Zip Code)

For further information concerning this matter, please call:

SERGIO BROOK

(Name of Person)

at (305) 613 9470

(Area Code & Daytime Telephone Number)

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

Mailing Address:

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

Street Address:

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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, DAMIAN CARLOS SILVA, hereby resign as TREASURER
(Title)

of US WHOLEFOODS INC
(Name of Corporation)

P 13000048399, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA



(Signature of resigning officer/director)

FILING FEE IS \$35.00

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

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 MAY 12 P 2:06

FILED

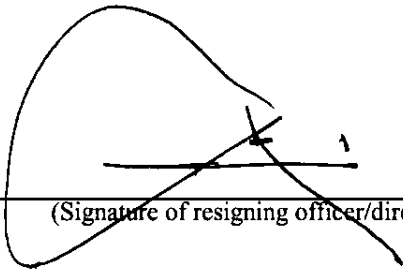
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, JUAN J. POLI, hereby resign as VICE PRESIDENT
(Title)

of US WHOLEFOODS INC,
(Name of Corporation)

P 430000 48399, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.


(Signature of resigning officer/director)

FILING FEE IS \$35.00

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

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