P13000050395

(Re	questor's Name)	
(Ad	ldress)	
. (Ad	ldress)	
(Cit	ty/State/Zip/Phone	÷#)
	MAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	<u>.</u>
Certified Copies	_ Certificates	of Status
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TRANSMITTAL LETTER

Division of Corporations GIANNOTTI SERVICES INC (Name of Corporation) DOCUMENT NUMBER: P13000050395 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MARIA DE LOS ANGELES GIARMONTHY (Name of Person) GIANNOTTI SERVICES INC (Name of Firm/Company) 4249 SW 137 CT MIAMI, FL 33175 (City/State and Zip Code) For further information concerning this matter, please call: MARIA DE LOS ANGELES GIARMONTHY (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Tallahassee, FL 32314

Mailing Address:

P.O. Box 6327

Amendment Section
Division of Corporations

TO:

Amendment Section

Street Address: Amendment Section

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

SANTIAGO E DELO	(Title)
	lame of Corporation)
P13000050395 (Document Number, if known)	, a corporation organized under the laws of the State of
	·
	(Signature of resigning officer/director)
	(Signature of resigning officer/director) SST ST

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