P13000069459

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Do	cument Number)			
Certified Copies				
Special Instructions to Filing Officer:				

Office Use Only



800292951538

12/23/16--01006--024 **35.00



DEC 3 0 2016

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: Coll Buiders Supply Co. (Name of Corporation)					
DOCUMENT NUMBER: Y 13000069459					
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Rosaly Mendez Bodriguez (Name of Person)					
(Name of Firm/Company)					
6663 Marcoassee Rd. (Address)					
OVando, FL 32822 (City/State and Zip Code)					
For further information concerning this matter, please call:					
Adrian Collaco at (40) 745-4641 (Name of Person) at (40) 745-4641 (Area Code & Daytime Telephone Number)					
Enclosed is a check for \$35.00 made payable to the Florida Department of State.					
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301					

CR2E044 (05/13)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	Rosaly	Mendez	Radiguez, h	ereby resign as_	Secre	tary	
			0			(Title)	
of_	Coll	Builder	S Supply Name of Corporation)	1 Co		,	
		(1)	Name of Corporation)				
		0069 US	, a corporati	on organized un	der the laws of	the State of	
	Florid	9	·				
	•						
			(Signature of resignature)	gning officer/direc	tor)	8 PEC 23 14 9	
						ر سے عدی ایس کا معند	

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