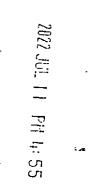
## P13000093710

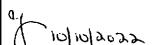
	anna da Maria	
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
·		•
PICK-UP	MAIT	MAIL
(Business Entity Name)		
,	•	•
	cument Number)	
(DC	icament Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



67 11/27--01/1/--021 \*\*55.00





## TRANSMITTAL LETTER

SUBJECT:	(Name of Corporation)	
DOCUMENT NUMBER: P1300009371	.0	
The enclosed Officer/Director Resignation	ı for a Corporation and fee are submitted for filin	
Please return all correspondence concernir	ng this matter to the following:	
Kathleen Massimino		
(Name of Person)		
Remediation 911 Water Fire Mold Inc.		
(Name of Firm/Company)	1	
581 105th Ave North Unit # 36		
(Address)		
Royal Palm Beach, FI 33411		
(City/State and Zip Code)	)	
For further information concerning this ma	atter, please call:	
Kathleen Massimino	561 6446777	
(Name of Person)	at (	
Enclosed is a check for \$35.00 made payal	ble to the Florida Department of State.	
Mailing Address:	Stront Address	
Amendment Section	Street Address: Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

**TO:** Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Anthony Massimino	, hereby resign as		
		(Title)	
Remediation 911 Water Fire Ma			
	(Name of Corporation)	<del></del>	
P13000093710		of the State of	
(Document Number, if known	)	Time Dance VI	
Florida			
	cu_	2022 JUL 1 1	
	(Signature of resigning officer/director)	70	
		25 F:	

## **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