P1300094094

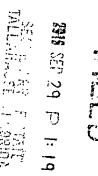
(Re	questor's Name)	
(Address)		
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

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TRANSMITTAL LETTER

Division of Corporations SUBJECT: CALDI COQUI INC (Name of Corporation) DOCUMENT NUMBER: P13000094094 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **SERGIO BROK** (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 BROK (Area Code & Daytime Telephone Number) (Name of Person)

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

Amendment Section

TO:

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, SERGIO BROK	, hereby resign as SECRETARY
7	(Title)
_{of} CALDI COQUI INC	
·	Corporation)
P13000094094 (Document Number, if known)	a corporation organized under the laws of the State of
FLORIDA	
	And
(Sign	ature 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