## P14000024956

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name	e)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Fishing Shrimp Enterprise # 2 Inc. (Name of Corporation)  DOCUMENT NUMBER: P14000024956
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Jose Monagas
(Name of Person)
(Name of Firm/Company)
2609 52nd ST W
(Address)
Lehigh Acres, FL 33971
(City/State and Zip Code)
For further information concerning this matter, please call:
Jose Monagas at (863 ) 234-1993 (Area Code & Daytime Telephone Number)
(Name of Person) (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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations P.O. Box 6327 Tallahassee, FL 32301

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Jose E Monagas	, hereby resign as Vice President	
of Fishing Shrimp Ent		
P14000024956 (Document Number, if known)	c of Corporation), a corporation organized under the laws of the State of	
Florida	ALLAHASSEE FLORI 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