

P14000034566

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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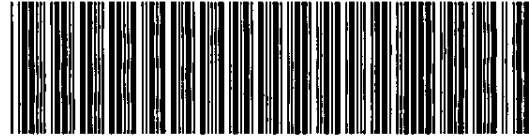
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL 32305

O/D

11-18-14

DC

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bells Forever /sen Center Corp.
(Name of Corporation)

DOCUMENT NUMBER: P 140000 34566

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gonzalo Oria

(Name of Person)

(Name of Firm/Company)

863 S.W. Grand Reserve Blvd

(Address)

Port Saint Lucie, Florida 34986

(City/State and Zip Code)

For further information concerning this matter, please call:

Gonzalo Oria

(Name of Person)

at (772) 318-9976

(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

Street Address:

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

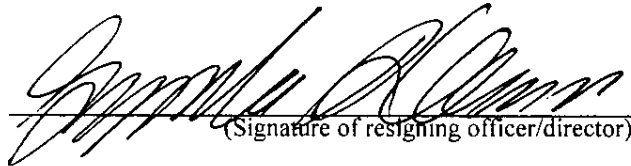
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, GONZALO ORTA, hereby resign as Vice President
(Title)

of Bella Forever Lissen Center Corp
(Name of Corporation)

P14000034566, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(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

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TALLAHASSEE, FLORIDA