

P14000065312

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

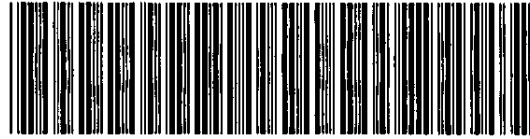
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
15 MAR 16 PM 3:39

MAR 16 2015
T. CARTER

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NDPG INC.
(Name of Corporation)

DOCUMENT NUMBER: P14000065312

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

Please return all correspondence concerning this matter to the following:

CAROLINA BONNIN

(Name of Person)

NDPG INC.

(Name of Firm/Company)

22003 SW 95 PL

(Address)

MIAMI, FL 33190

(City/State and Zip Code)

For further information concerning this matter, please call:

ADRIAN BONNIN **305 321-6947**

(Name of Person) at () (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**

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

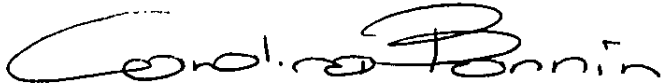
15 MAR 16 PM 3:39

CAROLINA BONNIN PRESIDENT
I, _____, hereby resign as _____
(Title)

NDPG INC.
of _____
(Name of Corporation)

P14000065312
_____, 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