

P140000 71270

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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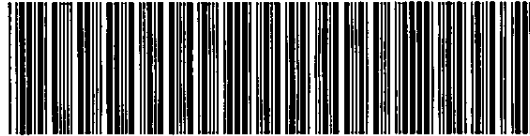
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
15 FEB 20 PM 3:30

FEB 25 2015

T. CARTER

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CORDICA DENTAL DESIGNS INC

(Name of Corporation)

DOCUMENT NUMBER: P14000071270

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

Please return all correspondence concerning this matter to the following:

ELIZABETH PEREZ DIAZ, DMD

(Name of Person)

CORDICA DENTAL DESIGNS INC

(Name of Firm/Company)

1410 BETH PAGE CT

(Address)

BRANDON, FL 33511

(City/State and Zip Code)

For further information concerning this matter, please call:

ELIZABETH PEREZ DIAZ, DMD at (941) 536-1215

(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

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

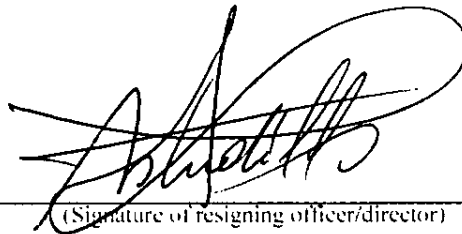
15 FEB 20 PM 3:30

I, ESTEBAN ASTUDILLO VIOLANTE, hereby resign as PRESIDENT
(Title)

of CORDICA DENTAL DESIGNS INC
(Name of Corporation)

P14000071270, 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