P14000079441

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
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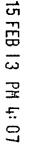
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SECRETARY OF STATE
ALLAHASSEF, FLORIDA





TRANSMITTAL LETTER

Division of Corporations

SUBJECT: C & E PROFESSIONAL BUSINESS CORP
(Name of Corporation)

DOCUMENT NUMBER: P14000079441

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

ANEIDA RIVERO
(Name of Person)

C & E PROFESSIONAL BUSINESS CORP
(Name of Firm/Company)

9010 SW 137 AVE
(Address)

MIAMI FL 33186
(City/State and Zip Code)

For further information concerning this matter, please call:

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

ANEIDA RIVERO

(Name of Person)

TO:

Amendment Section

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

(Area Code & Daytime Telephone Number)

• OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, ANEIDA RIVERO	, hereby resign as(Title)
	IONAL BUSINESS CORP
P14000079441 (Document Number, if known)	ne of Corporation), a corporation organized under the laws of the State of
FLORIDA	
	Thi
	(Signature of resigning officer/director)
	15 FEB 13 SECRETAR ALLAHASS

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to: