

(Re	questor's Name)	
(Address)		
(Ad	dress)	
(City/State/Zip/Phone #)		
PICK-UP	WAIT	MAIL MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificate	s of Status
Special Instructions to Filing Officer:		
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R. WHITE

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: PRIME FLOORS, CORP
(Name of Corporation)

DOCUMENT NUMBER: P14000085065

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

Please return all correspondence concerning this matter to the following:

Leonardo Forero

(Name of Person)

PRIME FLOORS, CORP

(Name of Firm/Company)

5622 PARKWALK CIRCLE E

(Address)

BOYNTON BEACH, FL 33472

(City/State and Zip Code)

For further information concerning this matter, please call:

Leonardo Forero

_{at (}561 \827-2100

(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

_{ı.} Osval E. Cruz	, hereby resign as Director
	(Title)
of PRIME FLOORS, CO	
(Name of C	'orporation)
P14000085065 (Document Number, if known)	corporation organized under the laws of the State of
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