P15000012098

(F	Requestor's Name)
(A	Address)
(A	Address)
(0	City/State/Zip/Phone #)
PICK-UP	MAIT MAIL
(E	Business Entity Name)
(Document Number)	
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TRANSMITTAL LETTER

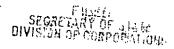
Amendment Section Division of Corporations TO:

SUBJECT: DISEGNO DUE, INC
(Name of Corporation) DOCUMENT NUMBER: P15000012098
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Marcelo F. Grilli
(Name of Person)
DISEGNO DUE INC
(Name of Firm/Company)
3575 23rd. Avenue S #104
(Address)
Lake Worth, FL 33461
(City/State and Zip Code)
For further information concerning this matter, please call:
Marcelo F. Grilli (Name of Person) at (561) 945-5958 (Area Code & Daytime Telephone Number)
(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



15 SEP -8 AM 7: 54

լ Horacio O. Cozzi	, hereby resign as V.P.
	(Title)
of DISEGNO DUE, IN	
(Name	of Corporation)
P15000012098 (Document Number, if known)	_, a corporation organized under the laws of the State of
Florida.	_ -
400	elle.
(S	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