

PI 50000 15644

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

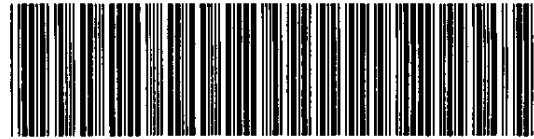
(Business Entity Name)

(Document Number)

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

C. GOLDEN

DEC 15 2017

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TOCUMEN PRODUCE INC

(Name of Corporation)

DOCUMENT NUMBER: P15000015644

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

Please return all correspondence concerning this matter to the following:

ROBERTO SOTO

(Name of Person)

TOCUMEN PRODUCE

(Name of Firm/Company)

5660 COLLINS AVE STE 21C

(Address)

MIAMI BEACH, FL 33140

(City/State and Zip Code)

For further information concerning this matter, please call:

ROBERTO SOTO

(Name of Person)

at (**646**) **235-1847**

(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

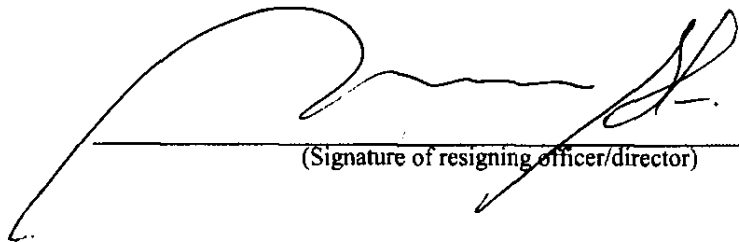
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, ROBERTO SOTO, hereby resign as PRESIDENT
(Title)

of TOCUMEN PRODUCE INC
(Name of Corporation)

P15000015644, 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

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TALLAHASSEE, FLORIDA