P150000041172.

(Re	questor's Name)
(Address)		
(Address)		
(Cit	ty/State/Zip/Phor	ne #)
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resignation no officer

12/11/15--01016--025 **35.00

15 DEC 11 PH 12: 01
SECRETARY OF STATE
TALLAHASSEE. FLORIDA

A RAMSEL

TRANSMITTAL LETTER

SUBJECT: JP ALL PROFESSIONAL SERVICES CORP

(Name of Corporation)

DOCUMENT NUMBER: P15000041172

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

JAIME PAZMIN

(Name of Person)

JP ALL PROFESSIONAL SERVICES CORP

(Name of Firm/Company)

5965 BENT PINE DR 2108

(Address)

ORLANDO, FL 32822

(City/State and Zip Code)

For further information concerning this matter, please call:

JAIME PAZMIN

407 497-2387

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

(Name of Person)

TO:

Amendment Section Division of Corporations

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

15 DEC 11 PM 12: 01

, JULIANA SALAZAR

, hereby resign as

WCEPRESIDENT

(Title)

JP ALL PROFESSIONAL SERVICES CORP

(Name of Corporation)

P15000041172

(Document Number, if known)

_, a 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