

P15000043128

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

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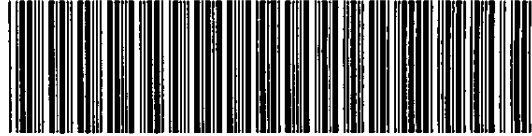
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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APR 27 2016
I ALBRITTON

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CARLA'S COMBO MEALS, INC
(Name of Corporation)

DOCUMENT NUMBER: P15000043128

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

Please return all correspondence concerning this matter to the following:

JOZELIA D OLIVEIRA
(Name of Person)

(Name of Firm/Company)

3542 OLEANDER TERR
(Address)

RIVIERA BEACH, FL 33404
(City/State and Zip Code)

For further information concerning this matter, please call:

JOZELIA D OLIVEIRA at (973) 289-4219
(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**


FILED
2016 APR 26 AM 11:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, JOZELIA D OLIVEIRA, hereby resign as VPDS
(Title)

of CARLA'S COMBO MEALS, INC
(Name of Corporation)

P15000043128, 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