P1500067911

| (Red | questor's Name) | - |
|---------------------------|-------------------|--------------|
| (Ado | dress) | |
| (Ado | dress) | |
| (City | y/State/Zip/Phone | e #) |
| PICK-UP | WAIT | MAIL |
| (Bus | siness Entity Nan | ne) |
| (Document Number) | | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to I | Filing Officer: | |
| | | |
| | | |
| | | |

Office Use Only



200277343992

09/28/15--01010--017 **35.00





TRANSMITTAL LETTER

| TO: | Amendment Section Division of Corporations |
|-----------------------|--|
| SUBJ | RENAISSANCE UPHOLSTERY & CANVASES INC (Name of Corporation) |
| ክበር | UMENT NUMBER: P15000067911 |
| | nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing |
| | e return all correspondence concerning this matter to the following: |
| AL | EXANDER GUARDIA |
| | (Name of Person) |
| | (Name of Firm/Company) |
| 400 | • • |
| 188 | 85 51ST TER SW |
| | (Address) |
| NA | PLES, FL 34116 |
| | (City/State and Zip Code) |
| For fo | orther information concerning this matter, please call: |
| ALI | EXANDER GUARDIA (Name of Person) at (239 (Area Code & Daytime Telephone Number) |
| | (Name of Person) (Area Code & Daytime Telephone Number) |
| Enclo | osed is a check for \$35.00 made payable to the Florida Department of State. |
| Amer Divis P.O. | ing Address: Independent Section Independent S |

CR2E044 (05/13)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| _{I,} ZOIKA PALMA | , hereby resign as PRESIDENT | |
|-------------------------------------|--|--|
| | (Title) | |
| of RENAISSANCE UPHO | OLSTERY & CANVASES INC | |
| P15000067911 | , a corporation organized under the laws of the State of | |
| (Document Number, if known) FLORIDA | | |

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Zoika Palma

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314