P 15000091817

(Requestor's Name)
(Address)
(Address)
((ddiedd)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(2000)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700305617277

11/14/17--01048--001 **35.00



101/253

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: NITRICA CORP.

(Name of Corporation)

DOCUMENT NUMBER: P15000091817

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

Please return all correspondence concerning this matter to the following:

Alvaro Castillo

(Name of Person)

Castillo & Associates

(Name of Firm/Company)

1390 Brickell Avenue Suite 200

(Address)

Miami, FL 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

Alvaro Castillo

.... 305

371-5540

(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

KARINA GROSMAN	, hereby i	resign as) irector	ſ	英国
	<u></u> :	8		(Title)	- AD
NITRICA CORP.					
(Name of Corp	oration)				
P15000091817 (Document Number, if known)	orporation orga	anized und	er the laws o	of the State o)f
Florida					
(Signatur	QUUV	MMUL)	r)	_	
(Signatui	or resigning of	neer/uneero	')		

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