

P15 000099803

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

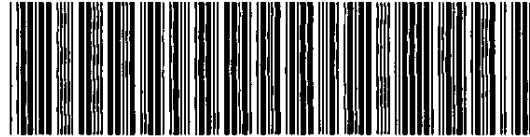
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

010 Resignation

JUL 13 2016

D CUSHING

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: ACT BOOKS INC  
(Name of Corporation)

DOCUMENT NUMBER: P 15000099803

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

Please return all correspondence concerning this matter to the following:

JOSE BORDA

(Name of Person)

ACT BOOKS INC

(Name of Firm/Company)

3390 MARY ST STE 116

(Address)

MIAMI FL 33133

(City/State and Zip Code)

For further information concerning this matter, please call:

JOSE BORDA

(Name of Person)

at ( 786 ) 547-1477

(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

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SECRETARY OF STATE  
TALLAHASSEE, FL

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

**FILING CANCELLED  
RETURNED CHECK**

I, JOHANN CHACON, hereby resign as PRESIDENT  
(Title)

of ACT BOOKS INC  
(Name of Corporation)

P15000099803 a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

J. L. GGH

(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

**FILED**  
**16 JUL -5 PM 2:58**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**