M6000001345

(Re	equestor's Name))
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Ві	usiness Entity Na	me)
(Document Number)		
Certified Copies	_ Certificate	es of Status
Special Instructions to Filing Officer:		
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FILED
2016 OCT 28 AM 9: 34
2016 OCT 28 AM 9: 34

Mon

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: OFFICER RESIGNATION
(Name of Corporation)
DOCUMENT NUMBER: P16000001345
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
MARIANELA SANCHEZ
(Name of Person)
SIETE ESTRELLAS, INC
(Name of Firm/Company)
10011 W. HILLSBOROUGH AVE.
(Address)
TAMPA, FL. 33615 (City/State and Zip Code)
For further information concerning this matter, please call:
MARIANELA SANCHEZ (Name of Person) at (813) 512-6797 (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

I, ELKER VASQUEZ	, hereby resign as_	PRESIDEN I (Title)
of SIETE ESTRELLA	AS INC.)
P16000001345 (Document Number, if known) FLORIDA	e of Corporation), a corporation organized und	der the laws of the State of
	Signature of resigning officer/direct	PILE OF 28 AM 9:

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