P16000030281

(Requestor's Name)					
(Address)					
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PICK-UP	☐ WAIT	MAIL			
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(Document Number)					
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TRANSMITTAL LETTER

SUBJECT: FONTINNI CORP (Name of Corporation)				
DOCUMENT NUMBER: P 16 0000 3 028				
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing				
Please return all correspondence concerning this matter to the following:				
(Name of Person)				
(Name of Ferson)				
TONTINNI COPP (Name of Firm/Company)				
10775 NW 21St ST # 160 (Address)				
Hiami Ft 33172 (City/State and Zip Code)				
For further information concerning this matter, please call:				
Callos Guillen at (786) 445 6124. (Name of Person) (Area Code & Daytime Telephone Number)				

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

Amendment Section Division of Corporations

TO:

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	Carlos	Guillen	, hereby resign as_	Secretary =
				(Title) E T
of	FONT	(Name of Corpo	or P	
PΙ	Lanna 309	81		der the laws of the State of
1	(Document Number, if	known)	poration organized un	ier the laws of the state of
	H.	·	n h	
		(Signature	of resigning officer/direct	or)

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