# 216000043229

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(Requestors Name)			
(Address)			
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(City/State/Zip/Phone #)			
(Business Entity Name)			
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LAHASSEE, FL



#### TRANSMITTAL LETTER

#### **TO:** Amendment Section Division of Corporations

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SUBJECT:	PITO INC	
(Name of C	Corporation)	
DOCUMENT NUMBER: P16000043229		
The enclosed Officer/Director Resignation for a Corpo	oration and fee are submitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
DANIEL DO REGO BAYARRES		
(Name of Person)		
MR PEPITO INC		
(Name of Firm/Company)		
16043 GRASS LAKE DR	202	
(Address)	2023 AUG 18	7]
TAMPA, FL 33618	call:	(1.6353) (1.6353)
(City/State and Zip Code)		n
For further information concerning this matter, please of	call:	0
DANIEL DO REGO BAYARRES 813 at (	419-9381 <b>3</b>	
(Name of Person) (Area	ea Code & Daytime Telephone Number)	

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

<u>Mailing Address:</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

### OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

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I,	CLAUDIO BLANCO	_, hereby resign as	PRESIDENT
ı. <u> </u>		, hereby reargin as	(Title)
of		IR PEPITO INC	,
	P16000043229	, a corporation organized under th	e laws of the State of
	(Document Number, if known) FLORIDA		
		(Signature of resigning officer/director)	2023 AUG 18 AM II: 53 SELALIAHASSEE, FL

#### 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