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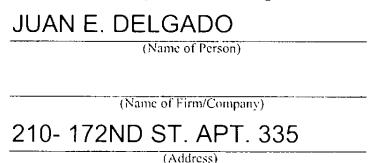
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TO: Amendment Section Division of Corporations



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

Please return all correspondence concerning this matter to the following:



SUNNY ISLES BEACH, FL 33160

(City/State and Zip Code)

For further information concerning this matter, please call:

JUAN E. DELGADO at (786)470-0200 (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.} JUAN EBERTH DELO	SADO, hereby	resign as PRESIE	DENT
TINY - TOTS HOME			(Title)
P16000043666	•	ganized under the laws o	of the State of
	ignature of resigning	MS casufa	2017 AUG 28 PM 2

FILING FEE IS \$35.00

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Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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