

P16000058868

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

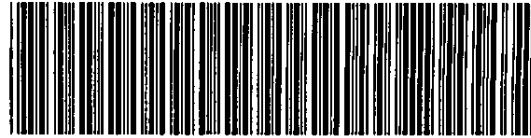
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

2/7/17

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PRINTING EXPERIENCE CORPORATION
(Name of Corporation)

DOCUMENT NUMBER: P16000058868

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

Please return all correspondence concerning this matter to the following:

AMY TORRIJOS

(Name of Person)

PRINTING EXPERIENCE CORP

(Name of Firm/Company)

14643 SW 6TH ST

(Address)

PEMBROKE PINES FL 33027

(City/State and Zip Code)

For further information concerning this matter, please call:

AMY TORRIJOS

(Name of Person)

at (954) 6830988

(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

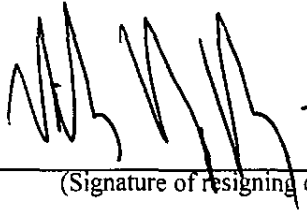
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, VICCTOR H AMARO, hereby resign as PRESIDENT
(Title)

of PRINTING EXPERIENCE CORPORATION,
(Name of Corporation)

P16000058868, a corporation organized under the laws of the State
(Document Number, if known)

FLORIDA.


(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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