

P160000 73917

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CASA MONDRAGONE, INC
(Name of Corporation)

DOCUMENT NUMBER: P16000073917

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

Please return all correspondence concerning this matter to the following:

H Wayne Hayes, Jr.

(Name of Person)

PatientTrac Corporation

(Name of Firm/Company)

975 Arthur Godfrey Road, Suite 401

(Address)

Miami Beach, Florida 33140

(City/State and Zip Code)

For further information concerning this matter, please call:

H Wayne Hayes, Jr. at 305 428-8326

(Name of Person)

(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**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2016 DEC 16 AM 9:13

I, SALVATORE MATUOZZO, hereby resign as President
(Title)

of CASA MONDRAGONE, INC.
(Name of Corporation)

P16000073917, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Salvatore Matuzzo 12/15/2016
(Signature of resigning officer/director)

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