

PI6 0000 77408

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

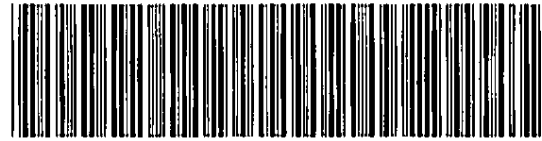
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900342149259

03/16/20 -01014--001 \*\$95.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2020 MAR 16 PM 2:21

QM  
3/23/20

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** C-I ZAGA GROUP, INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P16000077408

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

Please return all correspondence concerning this matter to the following:

Manuela Barua  
(Name of Person)

C-I ZAGA GROUP INC  
(Name of Firm/Company)

3300 PORT ROYALE DR N  
(Address)

FORT LAUDERDALE, FL 33308  
(City/State and Zip Code)

For further information concerning this matter, please call:

Manuela Barua at ( 706 ) 281-7931  
(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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Manuela Barua, hereby resign as VICE President  
(Title)

of C.I Zaga Group, INC  
(Name of Corporation)

P 16000077408 a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

Manuela Barua  
(Signature of resigning officer/director)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2020 MAR 16 PM 2:21

**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