P16000092914

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cid	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
·		

Office Use Only



400295012734

02/02/17--01012--007 **35.00



Nr.

TRANSMITTAL LETTER

SUBJECT: GlobalWare Consulting (Name of Co	prporation)
DOCUMENT NUMBER: 600292426296	<u>*</u>
The enclosed Officer/Director Resignation for a Corpora	ation and fee are submitted for filing
Please return all correspondence concerning this matter	to the following:
Armando J. Poleo	•
(Name of Person)	
(Name of Firm/Company)	
3892 Heron Ridge Lane	
(Address)	
Weston FL 33331	,
(City/State and Zip Code)	· · · · · · · · · · · · · · · · · · ·
For further information concerning this matter, please ca	ıll:
Armando J. Poleo _{at (} 954	707-8479 Code & Daytime Telephone Number)
(Name of Person) (Area	Code & Daytime Telephone Number)

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,} <u>Armando J. Poleo</u>	hereby resign as Director
of_GlobalWare Cons	ulting Corp. e of Corporation) (Title)
(Document Number, if known) Florida	, a corporation organized under the laws of the State of
	(Signamodof Jesigning 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