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TRANSMITTAL LETTER

Division of Corporations
SUBJECT: SANTONINI GROUP INC (Name of Corporation) DOCUMENT NUMBER: P17000005276
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SABB JANNOUN (Name of Person)
SANTORWI GROUP INC (Name of Firm/Company)
5523 RAWLS RD (Address)
TAMPA FL 33625 (City/State and Zip Code)
For further information concerning this matter, please call:
SAEB JANNOUN at (813) 240 4086 (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

TO:

Amendment Section

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

(Name of Corporation)	(Name of Corporation) P1700005276, a corporation organized under the laws of the State of		Such, hereby resign as RESIDENT (Title)
217000005276 a corporation organized under the laws of the State of	217000005276, a corporation organized under the laws of the State of	· SANIOKINI (Nam	(SKOUP - LAC
(Document Number, if known) FLOK (DA	(Document Number, if known) ECOK (DA	P17000005276	•
		(Document Number, if known) ACOK (DA	

FILING FEE IS \$35.00

ignature of resigning officer/director)

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

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