

PT70000 11528

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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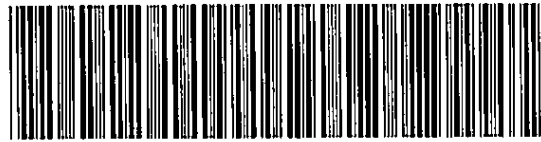
(Business Entity Name)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Tropical Supermarket of Florida II 10C
(Name of Corporation)

DOCUMENT NUMBER: P 170000 11529

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

Please return all correspondence concerning this matter to the following:

Altagracia Estevez
(Name of Person)

Tropical Supermarket of Florida II 10C
(Name of Firm/Company)

2416 Okeechobee RD Ste B
(Address)

Fort Pierce FL 34950
(City/State and Zip Code)

For further information concerning this matter, please call:

Altagracia Estevez at (754) 302-8340
(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, Bronilda Acosta, hereby resign as VP / D
(Title)

of Tropical Supermarket of Florida II INC
(Name of Corporation)

? 17000011528, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Bronilda Acosta
(Signature of resigning officer/director)

FILED
2021 MAY 28 PM 4:55
SECRETARY OF STATE
TALLAHASSEE, FL

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