

P170000068829

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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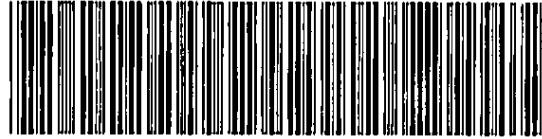
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

O SIMMONS

JAN 13 2020

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MIDAS TOUCH MARKETING SOLUTIONS INC

(Name of Corporation)

DOCUMENT NUMBER: P17000068829

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

Please return all correspondence concerning this matter to the following:

EMANUELLE OLIVEIRA

(Name of Person)

CSG CAPITAL SERVICES GROUP INC

(Name of Firm/Company)

1191 E NEWPORT CENTER DR SUITE 103

(Address)

DEERFIELD BCH, FL 33442

(City/State and Zip Code)

For further information concerning this matter, please call:

EMMA

954.427.4770

(Name of Person)

at (_____)

(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:

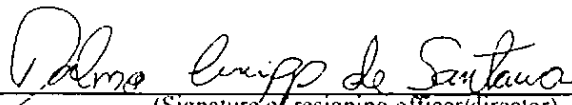
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, DALMO GRIPP DE SANTANA, hereby resign as DIRECTOR
(Title)

of MIDAS TOUCH MARKETING SOLUTIONS INC
(Name of Corporation)

P17000068829, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA


(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

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