P17000069421

(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busir	ness Entity Na	me)
(Docu	ment Number)
Certified Copies	Certificate	s of Status
0 1100 500 50		
Special Instructions to Fil	ing Officer:	

Office Use Only



100314546391

06/19/18--01007--009 **35.00

BIVISION OF CORPORATION

IM S. J. Solg

TRANSMITTAL LETTER

SECRETARY OF STATE OF STATE OF CORPORATION

2010 JUN 19 AM 11: 15

TO: Amendment Section Division of Corporations

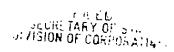
SUBJECT:	Arlex	Home	Se.	rvices,	Inc.
		(Name of C	Corporati	on)	
DOCUMENT NUM	BER: <u>71700</u>	00694	21		
The enclosed Officer	Director Resignation	for a Corpo	ration a	nd fee are sub	omitted for filing
Please return all corre	espondence concernin	g this matte	r to the	following:	
Arle	X Cordono (Name of Person)				
,	(Name of Person)				
	eri				
(:N	ame of Firm/Company)				
20 NU	O 87 th Ave	# A	225		
	(Address)				
Mia	mi FL 3 =	3172			
For further information	on concerning this ma	tter, please	call:		
Arlen	Cardona e of Person)	at (<u>/</u> /	6)	085 5	124
(:\din	. Or reison;	(MC	a code a	Daytime Ter	ephone (vanioer)

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
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



21:11MA 61 NUL MB

i,	Luz D. Barquero hereby resign as V. P.	
	(Title)	
of	Arlex Home Services Fine. (Name of Corporation)	
	(Document Number, if known) . a corporation organized under the laws of the State of	
	Florida.	
	In Dan Bound,	
	(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