PINOUPINO

(Re	equestor's Name)		
(Ad	dress)		
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	MAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			





500307942215

01/23/18--01020--015 **35.00

JAN 24 7019

TRANSMITTAL LETTER

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

Street Address: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, NATANAEL SANTA	NA . hereby resign a	_s VP	
		(Title)	
F & N TILE INSTALLATION CORP			
	of Corporation)		
P17000096778		undan tha karra af tha Stata af	
(Document Number, if known)	_, a corporation organized t	inder the laws of the State of	
FLORIDA			
	_		

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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