P18000048640

(Re	questor's Name)	
(Ad	dress)	
(6.4)	dress)	
(Au	uiess)	
(Cit	y/State/Zip/Phone #)	
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations		
INCASURI Corp.		
	(Name of Corporation)	
DOCUMENT NUMBER: P18000048640		
The enclosed Officer/Director Resignation	for a Corporation and fee are submitted for filing	
Please return all correspondence concerning	g this matter to the following:	
MIGUEL A. CABRERA REYES		
(Name of Person)		
INCASURI Corp.		
(Name of Firm/Company)		
1429. S. AUDUBON DR.		
(Address)		
HOMESTEAD FL 33035		
(City/State and Zip Code)		
For further information concerning this mat	tter, please call:	
MIGUEL A. CABRERA REYES	at () Area Code & Daytime Telephone Number)	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for \$35.00 made payab	le to the Florida Department of State.	
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	
	Tallahassee, FL 32303	

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

programme and the

MIGUEL A. CABRERA REYES	herehv resion as	
	(Title)	
of	INCASURI Corp.	
(Na	ame of Corporation)	
P18000048640	, a corporation organized under the laws of the State of	
(Document Number, if known)		
FLORIDA		
	(Signature of resigning officer/director) SEP 24 AM 10: 17 SEP 24 AM 10: 17	

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

FILING FEE IS \$35.00

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