

P 1900000 7577

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

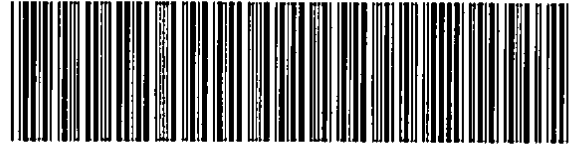
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C. GOLDEN

JUN - 8 2019

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **O.W. PAINTING CORP**
(Name of Corporation)

DOCUMENT NUMBER: **P19000007577**

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

Please return all correspondence concerning this matter to the following:

ODILIO WILSON MORALES FUENTES

(Name of Person)

O.W. PAINTING CORP

(Name of Firm/Company)

15420 LIVINGSTON AVE APT 507

(Address)

LUTZ, FL 33559

(City/State and Zip Code)

For further information concerning this matter, please call:

ODILIO WILSON MORALES FUENTES at **(571) 340-8796**

(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:

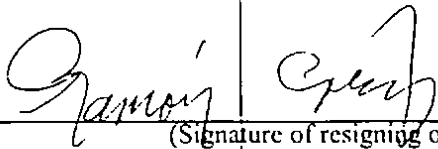
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, RAMON CRUZ, hereby resign as PRESIDENT
(Title)

of O.W. PAINTING CORP
(Name of Corporation)

P19000007577, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA


(Signature of resigning officer/director)

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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