P19000019812

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
		- <u>-</u>
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
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TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:(Nan	ne of Corporation)	
DOCUMENT NUMBER: P19000019812		
The enclosed Officer/Director Resignation for a	Corporation and fee are submitted for filing	
Please return all correspondence concerning this	matter to the following:	
Stephany Asorey		
(Name of Person)		
All in One Development		
(Name of Firm/Company)		
12900 SW 34th St		
(Address)		
Miami, FL 33175		
(City/State and Zip Code)		
For further information concerning this matter, p	elease call:	
Michael Adrian	954 931-3652 (Area Code & Daytime Telephone Number)	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for \$35.00 made payable to t	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	

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CR2E044 (05/13)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Stephany Asorey	Vice Presiden, hereby resign as		
·,	. Hereby resign as	(Title)	
All in One Development Inc			
	(Name of Corporation)		
P19000019812 (Document Number, if know	, a corporation organized under the laws on	of the State of	
Florida	 ·		
		202	
Step	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