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(Re	questor's Name)	
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(CII	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	1

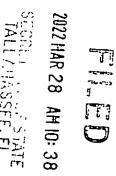
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03/29/22--01013--001 **35.00



9 4/12/2022

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: BOTANICA IFA ALDE BI INC (Name of Corporation)
DOCUMENT NUMBER: 219 0000 27692
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Cons Cabrera havarce (Name of Person)
Botanica IFA ALDE Bi INC (Name of Firm/Company)
90 NW Hast (Address)
(City/State and Zip Code) REL 33309
For further information concerning this matter, please call:
Cesar Colsetto at (754) 610 7693 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:

Amendment Section

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Mailing Address:

P.O. Box 6327

Amendment Section

Division of Corporations

Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, Cosar Cabrera HAVARCE hereby resign as VICE	PRESIDENT
of BOTANICA IFA ALDE BI INC. (Name of Corporation)	
(Document Number, if known). a corporation organized under the laws of	the State of
Florida	C. N.
(Signature of resigning officer/director)	FILED 2022 MAR 28 AM 10: 38 SECRETARS SEE FL

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