

P190000 46448

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700330383687

06/12/19--01007--011 **35.00

FILED

2019 JUN 12 PM 3:44

SECRETARY OF STATE
TALLAHASSEE, FL

JUN 14 2019

C. Kins

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FUNEZ SERVICES INC
(Name of Corporation)

DOCUMENT NUMBER: P19000046448

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

Please return all correspondence concerning this matter to the following:

SANTOS FUNEZ
(Name of Person)

3582 CARLTON ROAD
(Name of Firm/Company)
(Address)

LAKE WORTH FL 33461
(City/State and Zip Code)

For further information concerning this matter, please call:

SANTOS FUNEZ at (561) 969-8170
(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**

OLVIN JOEL RIVERA, hereby resign as VP
(Title)

of FUNEZ SERVICES INC
(Name of Corporation)

P19000046448, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Olvin J. Rivera
(Signature of resigning officer/director)

FILED
2019 JUN 12 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, 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