

P19 0000 48517

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SYSTEMNET INC.

(Name of Corporation)

DOCUMENT NUMBER: P19000048517

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

Please return all correspondence concerning this matter to the following:

PAMELA POVEDA

(Name of Person)

SYSTEMNET INC.

(Name of Firm/Company)

333 SE 2ND AVE SUITE 2810

(Address)

MIAMI, FL 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

PAMELA POVEDA

(Name of Person) at (305) 537-0800
(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

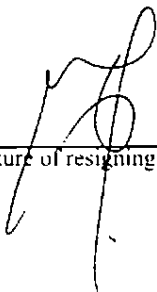
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, MARQUEVICH, GASTON, hereby resign as PRESIDENT AND TREASURER
(Title)

of SYSTEMNET INC.
(Name of Corporation)

P19000048517, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA, USA.


(Signature of resigning officer/director)

FILED
2021 JUL 13 AM 11:05

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