P20 00000 315 83

(Rec	questor's Name)			
(Add	iress)			
· (Ado	dress)			
(City	//State/Zip/Phone	≘ #)		
PICK-UP	☐ WAIT	MAIL		
(Bus	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
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2020 JUL 14 PM 6: 49

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

GOOD SERVICES FLOORING INC SUBJECT:				
	(Name of Corporation)			
DOCUMENT NUMBE	R: P20000031583			
The enclosed Officer/Di	rector Resignation f	for a Corporation	n and fee are submitted for filing	
Please return all correspondent	ondence concerning	this matter to the	ne following:	
OSMANI SECIN				
(N	(ame of Person)		·	
GOOD SERVICES FLOORI	NG INC			
(Namo	of Firm/Company)			
2240 SW 60 CT				
·············	(Address)			
MIAMI FL 33155				
(City/S	State and Zip Code)			
For further information of	oncerning this matt	ter, please call:		
OSMANI SECIN	7	at (305	32/- 3529 & Daytime Telephone Number)	
(Name of	rerson)	(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

YOEL MARIMON	hereby resign as		
	(Title)		
GOOD SERVICES FLOORING INC			
(Name of Corporation	n)		
P20000031583, a corpora	tion organized under the laws of the State of		
(Document Number, if known)	_		
FLORIDA (Signature of re	signing officer/director)	2020 JUI. 14 PM 6: 49	

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