P21000095746

(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Ci	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Ві	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
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'JUL -6 2022 M. SOLOMON

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporati	ons	
FIRE & SAFETY R SUBJECT:	EPORT LATAM INC.	
SOBSECT.	(Name of Corpor	ration)
DOCUMENT NUMBER: 1	21000095746	
The enclosed Officer/Directo	r Resignation for a Corporation	n and fee are submitted for filing
Please return all corresponde	nce concerning this matter to the	he following:
Walter D Grijalvo		
(Name	of Person)	-
FIRE & SAFETY REPORT LATA	AM INC.	
(Name of F	irm/Company)	•
1000 Brickell Avenue Suite 715		
(Ad	ldress)	•
Miami, FL 33131		
(City/State	and Zip Code)	•
For further information conce	erning this matter, please call:	
Luis Arturo Cedeno	786 at (271-3144
(Name of Perce	(Area Code	e & 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

JOSE M PLACERES	. hereby resign as	
	nereby resign ds	(Title)
FIRE & SAFETY REPORT LATAM II	NC.	,
(Nar	ne of Corporation)	
(Document Number, if known)	, a corporation organized under the la	iws of the State of
21000095746		
	 .	
1	Ju P	2022 MAY
	(Signature of resigning officer/director)	
		R.
		5

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