

P22000065160

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

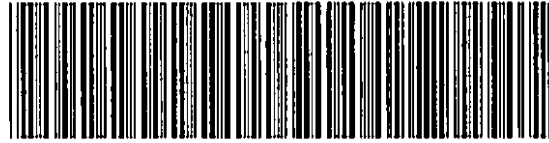
(Business Entity Name)

(Document Number)

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2023 JAN 18 PM 4:40

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Andinel Corp  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P22000065160  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Carola Olses  
\_\_\_\_\_  
(Name of Person)

Cales W LLC  
\_\_\_\_\_  
(Name of Firm/Company)

21040 NE 2nd Ct  
\_\_\_\_\_  
(Address)

Miami FL 33179  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Carola Olses  
\_\_\_\_\_  
(Name of Person) at ( 786 ) 5699706  
(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**

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I, Carola Olses, hereby resign as Director  
(Title)

of Andinet Corp  
(Name of Corporation)

P22000065160, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida  
\_\_\_\_\_



\_\_\_\_\_  
(Signature of resigning officer/director)

**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