P22000083765

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Only/Old/OZE)P/ Holle II/
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
<u></u>
Special Instructions to Filing Officer:





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A. BUTLER NOV 2 7 2023

TRANSMITTAL LETTER >

TO: Amendment Section Division of Corporations

P&P SOLUTIONS OF SW FL INC SUBJECT:		
(Name of Corporation)		
DOCUMENT NUMBER: P22000083765		
The enclosed Officer/Director Resignation for a Corporation	and fee are submitted for filing	
Please return all correspondence concerning this matter to the	ne following:	
XIOMARA GUERRA		
(Name of Person)		
P&P SOLUTIONS OF SW FL INC		
(Name of Firm/Company)	•	
1022 ALBANY CT		
(Address)		
NAPLES FL 34105		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
WILLIAM E. PARRA CRISTANCHO 239 at (778-5490	
(Name of Person) (Area Cod	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

I,	, hereby resign as	(Title)
of P&P SOLUTIONS OF SW FL INC	Name of Corporation)	
P22000083765 (Document Number, if known)	, a corporation organized under the la	nws of the State of
FLORIDA	<u></u>	
	(fige at the of resigning officer/director)	TILED 2023 NOV -3 AH 9: 3 SECTAL SEE FI

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