## P23000022460

| (Re                                     | equestor's Name)   | <del> </del> |
|---|--------------------|--------------|
| (Ad                                     | ldress)            |              |
| (Ad                                     | Idress)            |              |
| (Cit                                    | ty/State/Zip/Phone | e #)         |
| PICK-UP                                 | ☐ WAIT             | MAIL         |
| (Bu                                     | siness Entity Nar  | ne)          |
| (Do                                     | ocument Number)    |              |
| Certified Copies                        | _ Certificates     | of Status    |
| Special Instructions to Filing Officer. |                    |              |
|   |                    |              |
|   |                    |              |
|   |                    |              |





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09/15/23--01015--022 \*\*35.00

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## TRANSMITTAL LETTER

| JBJECT: (Name of Corporation)                   |  |  |
|---|--|--|
| DOCUMENT NUMBER: P23000022460                   |  |  |
| The enclosed Officer/Director Resignation for a | a Corporation and fee are submitted for filing             |  |
| Please return all correspondence concerning thi | s matter to the following:                                 |  |
| MAYERLY MURCIA                                  |  |  |
| (Name of Person)                                |  |  |
| MURCIAS PROFESSIONAL SERVICES                   |  |  |
| (Name of Firm/Company)                          | <del></del>  |  |
| 9061 SW 162ND PATH                              |  |  |
| (Address)                                       | <del></del>  |  |
| MIAMI FL 33196                                  |  |  |
| (City/State and Zip Code)                       |  |  |
| For further information concerning this matter, | please call:   |  |
| MAYERLY MURCIA                                  | 786 7476279  |  |
| (Name of Person)                                | (Area Code & Daytime Telephone Number)                     |  |
| Enclosed is a check for \$35.00 made payable to | the Florida Department of State.                           |  |
| Mailing Address:                                | Street Address:  |  |
| Amendment Section                               | Amendment Section  |  |
| Division of Corporations P.O. Box 6327          | Division of Corporations                                   |  |
| Tallahassee, FL 32314                           | The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 |  |
| 1 alialiassee, 1 L 32314                        | Tallahassee, FL 32303                                      |  |

**TO:** Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| JOSE SALVADOR CRUZ                       | VICE PRESIDENT   |  |
|--|--|--|
| .,                                       | VICE PRESIDENT, hereby resign as(Title)                |  |
| RUTA 40 CORP                             |  |  |
| (Na                                      | ime of Corporation)                                    |  |
| P23000022460 (Document Number, if known) | a corporation organized under the laws of the State of |  |
| FLORIDA                                  |  |  |
|  | (Signature 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