

P23000039373

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

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(Business Entity Name)

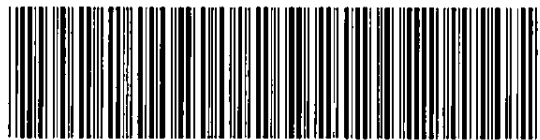
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Officer Resignation

(Name of Corporation)

DOCUMENT NUMBER: P23000039373

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

Please return all correspondence concerning this matter to the following:

German Angulo

(Name of Person)

Macri Lam Services Corp

(Name of Firm/Company)

3862 Barina St

(Address)

St. Cloud, FL 34769

(City/State and Zip Code)

For further information concerning this matter, please call:

Gilma Angulo
_____ at (727) 688-3433
(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:
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, German Angulo, hereby resign as President
(Title)

of Macri Lam Services Corp
(Name of Corporation)

P23000039373, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

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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