

PA5000011024

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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(Business Entity Name)

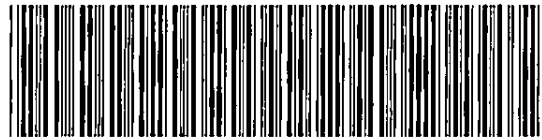
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TALLAHASSEE, FL

Mal
8/11/2011

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Max Force Inc.

(Name of Corporation)

DOCUMENT NUMBER: P25000011024

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

Please return all correspondence concerning this matter to the following:

Lorena Del Valle Garcia Di Bella

(Name of Person)

(Name of Firm/Company)

15468 SW 71st ST

(Address)

Miami, FL - 33193

(City/State and Zip Code)

For further information concerning this matter, please call:

Lorena Del Valle Di Bella at (786) 609 0670

(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

2025 JUN 11 PM 12:01
RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FL

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Lorena Del Valle Garcia Di Bella, hereby resign as MGR
(Title)

of Max Force Inc.
(Name of Corporation)

P25000011024, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

SECRETARY OF STATE
TALLAHASSEE, FL

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