Requestle's Name Lourdes A. Fernandez 4240 SW 3 Street Miami, Florida 33134

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.		
2.	(Corporation Name)	(Document #) 800031628789 -03/08/0001100003 *****35_00_ *****35_00
∠.	(Corporation Name)	(Document #)
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	☐ Walk in ☐ Pick up time _	Certified Copy
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	NEW FILINGS	<u>AMENDMENTS</u>
	Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
	OTHER FILINGS	REGISTRATION/QUALIFICATION SE SING
	☐ Annual Report ☐ Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

OFFICER / DIRECTOR RESIGNATION

1, Loundes A. Fernandez	, hereby resign as President
	(Title)
of Fernandez Knight, P. (Name of Co	orporation)
a corporation organized under the laws of the State	
and affirm that the corporation has been notified in	writing of the resignation.
- Churchio Co	Donardy Es si
(Signature o	of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314