

P94000030009

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

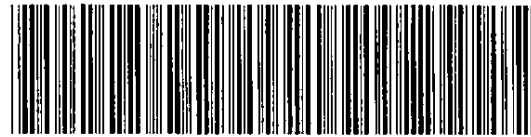
(Business Entity Name)

(Document Number)

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05/08/17--01017--022 \*\*25.00

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FILED  
2017 JUN - 8 PM 3:06  
TALLAHASSEE, FLORIDA

C. GOLDEN

JUN 13 2017

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Almar of Miami, Inc.  
(Name of Corporation)

DOCUMENT NUMBER: P94000030009

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

Please return all correspondence concerning this matter to the following:

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State and Zip Code)

**Mark S. Weinberg, ESQ.  
Gray Robinson, P.A.  
333 S.E. 2ND Avenue  
Suite 3200  
Miami, Florida 33131**

For further information concerning this matter, please call:

**MARK S. WEINBERG**

\_\_\_\_\_  
(Name of Person)

at ( 305 ) 416 6880  
(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  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

FILED

2017 JUN -8 PM 3: 06

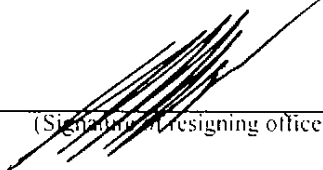
STATE  
TALLAHASSEE, FLORIDA

I, Mark Esquenazi, hereby resign as Director  
(Title)

of Almar of Miami, Inc.  
(Name of Corporation)

P94000030009, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(Signature of resigning 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