## P95000061813

(R	equestor's Name)	·
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		





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## TRANSMITTAL LETTER

SUBJECT: Miracle Movers Inc

(Name of Corporation)

DOCUMENT NUMBER: P95000061813

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

Please return all correspondence concerning this matter to the following:

Marvin Siegel

(Name of Person)

Miracle Movers INc

(Name of Firm/Company)

3151 S.Palm Aire dr unit 307

(Address)

Pompano Beach FI 33069

(City/State and Zip Code)

For further information concerning this matter, please call:

Marvin Siegel

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

(Name of Person)

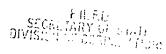
TO:

Amendment Section Division of Corporations

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

Area Code & Daytime Telephone Number)

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



16 JAN 11 AM 8: 45

<sub>ı,</sub> Marvin Siegel	, hereby resign as Officer	
	(Title)	
Miracle Movers Inc		
	of Corporation)	
P95000061813 (Document Number, if known)	_, a corporation organized under the laws of the State of	
Florida	·	
	SIL	
	Signature (M. Pasigning 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