P96000048321

(Re	questor's Name)			
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	dress)			
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(Cit	y/State/Zip/Phone	e #)		
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TRANSMITTAL LETTER

SUBJECT:	MAGBE Consulting Services, Inc.
SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER:_	P96000048321
The enclosed Officer/Directo	r Resignation for a Corporation and fee are submitted for filin
Please return all corresponde	nce concerning this matter to the following:
Magali	R. Abad
(Name	of Person)
MAGBE Co	nsulting Services, Inc.
(Name of I	irm/Company)
2430	SW 18 Street
(A	ldress)
Miai	ni Florida 33145
(City/State	and Zip Code)
For further information conc	erning this matter, please call:
Magali R. Abad	305 491-0444
(Name of Pers	at () (Area Code & Daytime Telephone Number)
	0 made payable to the Florida Department of State.

Tallahassee, FL 32314

Amendment Section

P.O. Box 6327

Division of Corporations

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Ī	Irela Bagué	hereby resign as	Vice-President (Title)
of <u> </u>		ulting Services, Inc	
	P96000048321 (Document Number, if known) Florida	a corporation organized under t	the laws of the State of
		·	
	Du	(Signature of resigning officer/director)	2020 :
			<u> </u>

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