-P97000017588

(Re	equestor's Name)	
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off. Resign.

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COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT: RESIGNATION OF OFFICER/DIRECTOR
2020	(Name of Corporation)
DOC	UMENT NUMBER: P97000017588
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
IGO	R FEDERICO ABAD-PORTA
	(Name of Person)
SHE	ELI OF FLORIDA CORPORATION
	(Name of Firm/Company)
3047	7 LAKEWOOD DRIVE
	(Address)
WES	STON, FL 33332
	(City/State and Zip Code)
For fu	orther information concerning this matter, please call:
SER	GIO MAFFONGELLI at (954) 815-1472 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	sed is a check for \$35.00 made payable to the Florida Department of State.
Amen Divisi Clifto 2661	Mailing Address: Idment Section Ion of Corporations In Building Executive Center Circle Inassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, IGOR FEDERICO ABAD-PORTA	, hereby resign asDIRECTOR SECRETARY
of SHELI OF FLORIDA CORP.	(Title)
D07000017588	corporation organized under the laws of the State of
FLORIDA	
Signa (Signa	ture of resigning officer/director)
Jgn C (Signal	

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