(R	Requestor's Name)		
(Δ	Address)		
(A	Address)		
(0	Dity/State/Zip/Phone #)		
PICK-UP	WAIT MAIL		
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer			
	J. HORNE AUG 1 1 2023		

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT:	UBJECT: SANTA BARBARA PROPERTIES, INC.		
		(Name of Corporation)	
DOCUMENT N	UMBER:P970000	024317	
The enclosed Of	ficer/Director Resignation	for a Corporation and fee are submitted for filing	
Please return all	correspondence concernin	g this matter to the following:	
Erlinda (Guajardo-Garcia		
	(Name of Person)		
Santa Ba	arbara Properties, In	ıc.	
	(Name of Firm/Company)		
5850 SW	7 19TH Street		
	(Address)		
Miami, Fl	orida 33155		
	(City/State and Zip Code)		
For further infor	mation concerning this ma	tter. please call:	
	ajardo-Garcia	at (305) 262-0106 (Area Code & Daytime Telephone Number)	
	Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a cho	eck for \$35.00 made payab	ole to the Florida Department of State.	
Mailing A	ddress:	Street Address:	
	ent Section	Amendment Section	
	of Corporations	Division of Corporations	
P.O. Box		The Centre of Tallahassee	
Tallahass	see, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

{I.} DOMINGO GARCL	A, hereby resign as	VICE-PRESIDENT	
		(Title)	
of SANTA BARBARA PI	ROPERTIES, INC.		
	(Name of Corporation)		
P97000024317	, a corporation organized under the laws of the State of		
(Document Number, if known)			
FLORIDA			
·			

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