## 

(Requestor's Name)	_
(Address)	_
(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	





02/01/13--01019--014 \*\*35.00



## TRANSMITTAL LETTER

TO: Amendment Section **Division of Corporations** 

B.P. 36TH STREET, INC.

(Name of Corporation)

DOCUMENT NUMBER: P97000039829

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

Please return all correspondence concerning this matter to the following:

JULIO C. ALONSO, ESQ.

(Name of Person)

JULIO C. ALONSO, P.A.

(Name of Firm/Company)

300 SEVILLA AVENUE, #301

(Address)

CORAL GABLES, FL. 33134

(City/State and Zip Code)

For further information concerning this matter, please call:

JULIO C. ALONSO, ESQ. (Area C

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** 409 E. Gaines Street Tallahassee, FL 32399

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. LAZARO M. PEREA	, hereby resign as DIRECTOR
	(Title)
of B.P. 36TH STREET	
P97000039829 (Document Number, if known) FLORIDA	, a corporation organized under the laws of the State of
	Aucea gnature 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