

P97000072225

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: JOE Cino Enterprises Inc
(Name of Corporation)

DOCUMENT NUMBER: P 970000 72225

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

Please return all correspondence concerning this matter to the following:

Cynthia S Cino
(Name of Person)

Cino's TAXI SERVICE
(Name of Firm/Company)

PO Box 425
(Address)

Ft. Smith, Florida 34449
(City/State and Zip Code)

For further information concerning this matter, please call:

Cynthia S Cino at (352) 447 4017
(Name of Person) (Area Code & Daytime Telephone Number)

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**

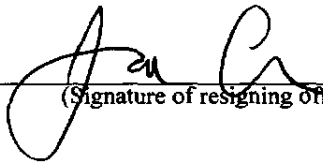
I, Joseph Cino, hereby resign as Pres
(Title)

of Joe Cino Enterprises Inc
(Name of Corporation)

P 970000 72225, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA


(Signature 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