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(Re	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
. (Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer.	





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TRANSMITTAL LETTER

BEAUTIFUL RANCH HORSES CORPORATION SUBJECT: (Name of Corporation) DOCUMENT NUMBER: 65-0880797 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: OLANDA ARANGO (Name of Person) BEAUTIFUL RANCH HORSES CORPORATION (Name of Firm/Company) **5924 SW 89TH STREET** (Address) **OCALA, FL 34476** (City/State and Zip Code) For further information concerning this matter, please call: JAIME CARDONA (Name of Person)
(Area Code & Daytime Telephone Number)
5851 Wolwers Rt Apt 3324
Par H au は Fl 33067
Enclosed is a check for \$35.00 made payable to the Florida Department of State. **Mailing Address:** Street Address: Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

YOLANDA RANG	ا و	hereby resign as)V	(Title)
of BEAUTIFUL RAI	NCH HOP		RPORA	TION ,
65-0880797	•	ion organized unde	r the laws of	the State of
(Document Number, if known) FLORIDA	·			
Syl	and to	Buy 5	·	#24 Pi
	(Signature of res	igning 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