

P9 8000107521

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(City/State/Zip/Phone #)

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## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: HOEFLINGER & CHIARINI, INC.  
(Name of Corporation)

DOCUMENT NUMBER: P98000107521

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

Please return all correspondence concerning this matter to the following:

VERONICA HOEFLINGER  
(Name of Person)

HOEFLINGER & CHIARINI, INC.  
(Name of Firm/Company)

26 SW 25 Road  
(Address)

MIAMI, FL 33129  
(City/State and Zip Code)

For further information concerning this matter, please call:

VERONICA HOEFLINGER at (305) 200 8376  
(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

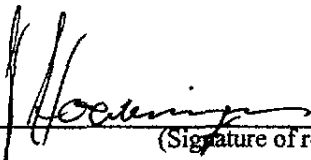
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, VERONICA HOEFLINGER, hereby resign as TREASURER  
(Title)

of HOEFLINGER & CHAPIN, INC  
(Name of Corporation)

P90000107521, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

**FILED**  
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SECRETARY OF STATE  
TALLAHASSEE, 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