P990000/6956

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
- (City/	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Na	me)
(Doce	ument Number))
Certified Copies	Certificate	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



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JUL 16 2013 T. LEMIEUX



TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Convert Grost Two. (Name of Corporation) DOCUMENT NUMBER: P9900016956
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following: (Name of Person)
(Name of Firm/Company) 6502 CHAMPLAN CREACE (Address)
DAVIC, FLORIDA 33331 (City/State and Zip Code)
For further information concerning this matter, please call: ANDIDO SOSA, Ja. at (954) 673-9439 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

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Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. LANDIOD Sosa, Fr., hereby resign as Chef Anacial Officer

Of Corvest (Name of Corporation)

P9900016956, a corporation organized under the laws of the State of

(Document Number, if known)

Florior

(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