## P9900081119

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Dod	cument Number)	<b>AH</b> 1 <b>9</b> 13
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Msignation To officer

05/07/12--01019---022 \*\*35.00



5/0/12

## **COVER LETTER**

SUBJECT: Little Latitudes Tra	
	(Name of Corporation)
DOCUMENT NUMBER: P9	9000081119
The enclosed Officer/Director Re	signation for a Corporation and fee are submitted for filing
Please return all correspondence of	concerning this matter to the following:
Lynda M Avallone	
(Name of Pe	erson)
(Name of Firm/	Company)
436 Sebastian Sq	
(Address	s)
St Augustine FL 32095	,
(City/State and	Zip Code)
For further information concerning	g this matter, please call:
Lynda M Avallone	at ( 904 ) 540-8804 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 ma	ade payable to the Florida Department of State.
Street Address:	Mailing Address:
Amendment Section	Amendment Section Division of Corporations
Division of Corporations Clifton Building	Post Office Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FILED

2812 HAY -7 PM 2: 36

		こ かずりてじ
Lynda M Avallone	, hereby resign as	SECRETARY OF STATE TALLAHASSEE, FLORID Secretary & Treasurer
		(Title)
of_Little Latitudes Trading Co.	Inc.	
(Na	ame of Corporation)	
P99000081119	, a corporation organized un	der the laws of the State of
(Document Number, if known)	- <del></del>	
Florida		
	<del></del>	
	gode M Quallone	<u> </u>
	(Signature of resigning officer/direct	tor)

1 .

## **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