99900092170	
(Requestor's Name) (Address) (Address)	600137173886
(City/State/Zip/Phone #)	11/14/0801059003 **140.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	SECRETARY OF
Office Use Only	Pasign C.COULLIETTE NOV 192008
	EXAMINER

## COVER LETTER

Amendment Section TO: **Division of Corporations** 

SUBJECT: MARINA GAILD MA (Name of Corporation)

DOCUMENT NUMBER: <u>P990000 92170</u>

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

Please return all correspondence concerning this matter to the following:

GAILO, DIANA (Name of Person) MARINA GAILO PA (Name of Firm/Company) 707 MELALEUCA DE TAMAYAC, F/ 33319 (City/State and Zip Code)

For further information concerning this matter, please call:

Marina Gallo (Name of Person) at (954) 675-9969 (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 Clifton Building** 2661 Executive Center Circle Tallahassee, FL 32301 Mailing Address: Amendment Section **Division of Corporations** Post Office Box 6327 Tallahassee, FL 32314

## **OFFICER / DIRECTOR RESIGNATION** FOR A CORPORATION

I, <u>GAILO, DIANA</u>, hereby resign as <u>VICE PICESIDENT</u> (Title) of <u>MANINA GAILU PA</u> (Name of Corporation)

 $\frac{P9900092170}{(\text{Document Number, if known)}}$ , a corporation organized under the laws of the State of

Florida .

B NOV IL AMIL: 32 ETARY OF SU Signature of resigning officer/director C.C.S.LER 

## 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