V19970

(Re	equestor's Name)	
(Ad	idress)	<u></u>
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	∋ #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	· <u>· · · · · · · · · · · · · · · · · · </u>

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SECRETARY OF STATE

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Designo Inc. (Name of Corporation)
DOCUMENT NUMBER: V19970
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MANUEL VICNANSKY (Name of Person)
Designeo, INC. (Name of Firm/Company)
(Address) 3383 NW 167th Street
(Address) Opa Locker, Florida 33056 (City/State and Zip Code)
For further information concerning this matter, please call:
Manuel Vicnansky at (305) 474-7779 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
the contract of the contract o
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

FROM : TRAVEL CUTS

FILED
04 OCT 13 PM 4: 20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

ľ,	TRIVE VICNANTKY hereby resign as VP / TREASURER
	(Tide)
of_	Designed INC. (Name of Corporation)
	V19970 a corporation organized under the laws of the State of (Document Number, if known)
	FLORIDA
	I MILLERIA
	(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
Tallahassea, Florida 32314