

(Re	questor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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>



 τ



12/23/14--01027--002 **35.00

TRANSMITTAL LETTER

SUBJECT: 5HITA INC
(Name of Corporation)

DOCUMENT NUMBER: V433 & 2

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

Please return all correspondence concerning this matter to the following:

Hamulan R Parl 34442

(Name of Firm/Company)

464 E. Liberty St.
(Address)

Henando FL 34442

(City/State and Zip Code)

For further information concerning this matter, please call:

Hamulan R Parl at (353) 514 - 0461
(Name of Person)

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

TO:

Amendment Section Division of Corporations

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 30, 2014

HASMUKH R PATELI SHITAL, INC. 464 E LIBERTY ST HERNANDO, FL 34442

SUBJECT: SHITAL, INC. Ref. Number: V43382

We have received your document for SHITAL, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please have Shital H Patel sign the resignation form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 614A00027369

OFFICER / DIRECTOR RESIGNATION - FOR A CORPORATION

I,	Shitul H Patel, hereby resign as Pres. / V.P. / Sec / Tress
of	Shitel ire. (Name of Corporation)
	, a corporation organized under the laws of the State of (Document Number, if known)
	<u>V43382</u>
	(Signature of resigning officer/director)
	26 F
	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

WAIVER OF NOTICE OF THE SPECIAL MEETING OF THE BOARD OF DIRECTORS OF SHITAL, INC.

The undersigned, being all the directors of SHITAL, INC., consent that a special meeting be held at the corporate offices, on 19th December, 2014, at 10:00 a.m. We waive further notice of the meeting.

Shital H. Patel