

N09000004591

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

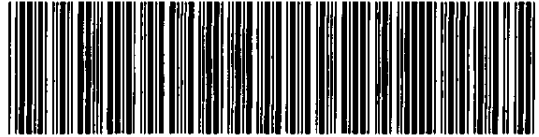
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

off Resign
C.COULLETTE

OCT 28 2009

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Florida Interpreters & Translators Association Inc
(Name of Corporation)

DOCUMENT NUMBER: N - 0900000 4591 (FITA)

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

Please return all correspondence concerning this matter to the following:

Maria Isabel Rodriguez
(Name of Person)

(Name of Firm/Company)

715 NE 115th Street
(Address)

Biscayne Park FL 33161
(City/State and Zip Code)

For further information concerning this matter, please call:

Maria Isabel Rodriguez at (305) 796 5100
(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
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, María Isabel Rodríguez, hereby resign as Director
(Title)

of Florida Interpreters & Translators Association, Inc
(Name of Corporation)

(FITA) 110900004591, a corporation organized under the laws of the State of
(Document Number, if known)
Florida

María Isabel Rodríguez
(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

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WHLBPP