P05000010495

ALCALA Enteprises (Requestor's Name) . MC
(Requestor's Name)
(he on ARDO) ALCALA
(Address)
106 NE6 thaue
(Address)
Cape Coral, FL 3390 (City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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<u>'</u>
Special Instructions to Filing Officer:
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Office Use Only



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01/04/11--01041--012 **35.00

off. Resign.

1-10-11

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: ALCALA ENTERPRI	SES, INC.
SUBJECT	· (Name of Corporation)
DOCUMENT NUMBER: P050	00010495
The enclosed Officer/Director Resig	nation for a Corporation and fee are submitted for filing
Please return all correspondence con	cerning this matter to the following:
LEONARDO ALCALA	
(Name of Perso	on)
ALCALA ENTERPRISES, INC.	
(Name of Firm/Cor	npany)
106 NE 6TH AVENUE	
(Address)	
CAPE CORAL FL 33909 US	
(City/State and Zip	Code)
For further information concerning t	his matter, please call:
LEONARDO ALCALA	at (239) 214-1037 (Area Code & Daytime Telephone Number)
(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

TALLAHASSEE. FLORIDA

I. JORGE REYES	, hereby resign as TREASURER
7	(Title)
of ALCALA ENTERPRISES, INC.	
	of Corporation)
P05000010495 (Document Number, if known)	_, a corporation organized under the laws of the State of
FLORIDA	
	 '

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314