

P09000027773

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

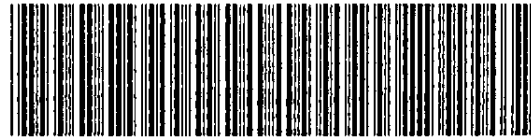
(Business Entity Name)

(Document Number)

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STATE OF MICHIGAN  
REGISTRY

O/D Resign.

02/16/11

Dc

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LA HACIENDA SEAFOOD RESTAURANT INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P09000027773

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

Please return all correspondence concerning this matter to the following:

KARLA NARVAEZ

(Name of Person)

LA HACIENDA SEAFOOD RESTAURANT INC

(Name of Firm/Company)

29363 SW 152ND AVE

(Address)

HOMESTEAD, FL 33033

(City/State and Zip Code)

For further information concerning this matter, please call:

KARLA NARVAEZ

(Name of Person)

at ( 305 ) 773-1603

(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, BLANCA E BARRAGAN, hereby resign as SECRETARY  
(Title)

of LA HACIENDA SEAFOOD RESTAURANT INC.  
(Name of Corporation)

P09000027773, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA



(Signature of resigning officer/director)

**FILED**  
11 FEB 14 PM 12:53

**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