P10000024193

| (Re | questor's Name) | |
|---|--------------------|-------------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | ry/State/Zip/Phone | e #) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Document Number) | | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
| | | |
| | | |
| | | : |
| | | |

Office Use Only



200280087282

01/26/16--01006--020 **35.00

2016 JAN 26 PM 5: 27
SECRETARY OF STATE

JAN 2 7 2016 C. CARROTHERS

TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations |
|--|
| SUBJECT: ONE LATAM, INC. (Name of Corporation) |
| DOCUMENT NUMBER: P10000026193 |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filin |
| Please return all correspondence concerning this matter to the following: |
| CAMILO A. ESPINOSA |
| (Name of Person) |
| LOIGICA |
| (Name of Firm/Company) |
| 400 NW 26 ST |
| (Address) |
| MIAMI, FL 33127 |
| (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| CAMILO A. ESPINOSA at (305 7261537 (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. |
| Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Callabaseae FL 32314 Tallabaseae FL 32314 Tallabaseae FL 32301 |

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| GRACE A RACKOWE | PRESIDENT, hereby resign as | |
|---|--|--|
| -7 | (Title) | |
| ONE LATAM, INC. | | |
| | e of Corporation) | |
| P10000026193 | , a corporation organized under the laws of the State of | |
| (Document Number, if known) | | |
| FLORIDA | | |
| *************************************** | · | |

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