

## P06000076883

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SECRETARY OF STATE
TALL AHASSEE FLORIN

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## COVER LETTER . . .

Amendment Section

**Division of Corporations** 

TO:

(Name of Corporation) P06000076883 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MAICKEL VAZQUEZ (Name of Person) (Name of Firm/Company) 7372 W 34TH AVE HIALEAH, FLORIDA 33018 (City/State and Zip Code) For further information concerning this matter, please call: **ESPERANZA HERNANDEZ** (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 Mailing Address: Amendment Section Division of Corporations **Division of Corporations** 

Post Office Box 6327 Tallahassee, FL 32314

CR2E044(08/05)

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, hereby resign as SI			
	(T	itle)	
INC.			• •
e of Corporation)			
, a corporation organized under	r the laws of the	e State of	1 11
<u>_</u> .	• 6	APR 21 CRICIAN LAHAS	FI
		SEE, F	ED
(Signature of resignific of officer/director)			
	INC. e of Corporation), a corporation organized unde	INC. e of Corporation) , a corporation organized under the laws of the	(Title)  INC. e of Corporation)  a corporation organized under the laws of the State of ALLAHASSEE, FLORIDA  Arawa

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