

G97188

(Requestor's Name)

(Address)

(Address)

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@ 7/13/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TEXON, INC.
(Name of Corporation)

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:

OSCAR R. MONDINO

(Name of Person)

TEXON, INC.

(Name of Firm/Company)

13501 SW 128TH STREET, SUITE 216

(Address)

MIAMI, FLORIDA 33186

(City/State and Zip Code)

For further information concerning this matter, please call:

KARINA MONDINO

(Name of Person)

at (305) 238-5111

(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

I, GUILLERMO O. MONDINO, hereby resign as PRESIDENT
(Title)

_____, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA.

(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

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