M81951

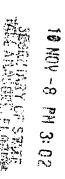
<u> </u>					
(Requestor's Name)					
(Address)					
(National)					
(Address)					
(City/State/Zip/Phone #)					
(=1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
(Social Manual)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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11/08/10--01008--015 **35.08





COVER LETTER

Division of Corporations
SUBJECT: Prodek 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:
Rajael Sminet (Name of Person)
Prock Inc (Name of Firm/Company)
10900 NW, ZI ST, UNIT # 190
MIGMI, PC 3317Z (City/State and Zip Code)
For further information concerning this matter, please call:
RAJACI SANCHET at (305) 594 - 4488 (Area Code & Daytime Telephone Number)
(Name of Felson) (New Code & Baytime Folephone Namon)

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

TO: Amendment Section

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

CR2E044(08/05)

I new the

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, LUIS E	Lofez	, hereby resign as	President (Title)	-	
of PRODEK	INC (Name of C	orporation)		,	
(Document Num	ober, if known)	corporation organized ur	nder the laws of the State	e of	
FLORINA					
-	(Signa	Ature of resigning officer/direct	tor)	10 NOV -8 PH 3: 0	Alera Kuya ba

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