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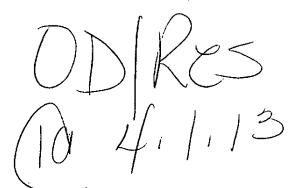
(Re	questor's Name)	
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TRANSMITTAL LETTER

Colombian Association of North Florida, Inc. (Name of Corporation) DOCUMENT NUMBER: N04000010172 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Lisha Lopez (Name of Person) (Name of Firm/Company) 2944 Fruitwood Lane (Address) Jacksonville, FL 32277 (City/State and Zip Code) For further information concerning this matter, please call: Lisha Lopez (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. **Mailing Address:** Street Address: Amendment Section Amendment Section Division of Corporations **Division of Corporations** 409 E. Gaines Street P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32399

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

լ Lisha Lopez	, hereby resign as Secretary Director
77	(Title)
	tion of North Florida, Inc.
N0400010172	Corporation) , a corporation organized under the laws of the State of
Florida	
	visha Lobez pature of resigning officer/director)

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