

N050000000652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

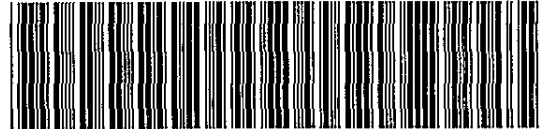
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500053813845

FILED

05 MAY 13 PM 1:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05/13/05--01029--023 **35.00

Abdirect
reign
KOP
5/13

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LATIN AMERICA MASONIC FOUNDATION INC
(Name of Corporation)

DOCUMENT NUMBER: N05000000652

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOSE' CARLOS SANTOS
(Name of Person)

LATIN AMERICA MASONIC FOUNDATION INC.
(Name of Firm/Company)

14609 PINE GLEN CIRCLE
(Address)

LUTZ, FL 33559
(City/State and Zip Code)

For further information concerning this matter, please call:

JOSE' CARLOS SANTOS at (813) 975 1409
(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
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

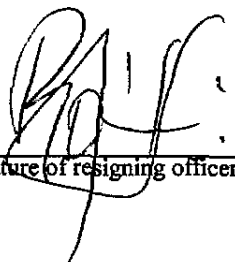
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, RAUL G-Mulattieri, hereby resign as VP
(Title)

of LATIN AMERICA MASONIC FOUNDATION INC.
(Name of Corporation)

N05000000652, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILED
05 MAY 13 PM 1:55
SECRETARY OF STATE
TALLAHASSEE, 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