

NO60000003286

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

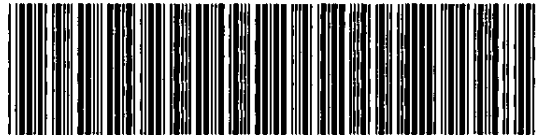
(Business Entity Name)

(Document Number)

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10 MAY 17 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Roberts MAY 19 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Puerto Rican Organization for Cultural Enhancement and Reaffirmati
(Name of Corporation)

DOCUMENT NUMBER: N06000003286

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

Please return all correspondence concerning this matter to the following:

Israel Pabon

(Name of Person)

(Name of Firm/Company)

9604 Windrift Circle

(Address)

Fort Pierce, FL 34945

(City/State and Zip Code)

For further information concerning this matter, please call:

Israel Pabon

(Name of Person)

at (772) 460-8137

(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

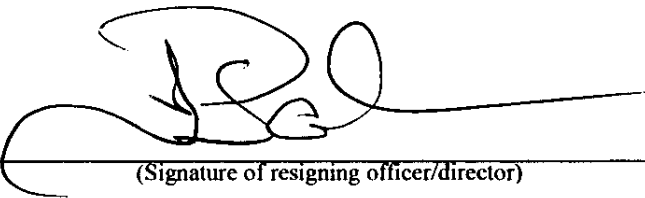
FILED
10 MAY 17 PM 12:17
CLERK OF STATE
TALLAHASSEE, FLORIDA

I, Israel Pabon, hereby resign as President
(Title)

of Puerto Rican Organization for Cultural Enhancement and Reaffirmation, Inc.
(Name of Corporation)

N06000003286, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature 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