

108000002481

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

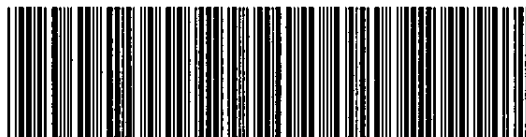
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Off  
Per  
[Signature]

MARCH 31, 2009.

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** PARTIDO LIBERAL CONSTITUCIONALISTA, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** N08 000 00 2481

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

Please return all correspondence concerning this matter to the following:

CONNY DUARTE  
(Name of Person)

PARTIDO LIBERAL CONSTITUCIONALISTA, INC.  
(Name of Firm/Company)

3888 NW 4th ST.  
(Address)

Miami, FL 33126  
(City/State and Zip Code)

For further information concerning this matter, please call:

ROBERTO OROZCO at ( 305 ) 785-7722  
(Name of Person) (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**

I, ROBERTO ORTIZ, hereby resign as DIRECTOR.  
(Title)

of PARTIDO LIBERAL CONSTITUCIONALISTA, INC.  
(Name of Corporation)

NOB 000002481, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA.

Roberto Ortiz  
(Signature of resigning officer/director)

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2009 APR -6 PM 1:22  
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