N09000007650

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TO: Amendment Section
Division of Corporations

SUBJECT: NEW ERA INSTITUTE, INC.
_____
(Name of Corporation)

DOCUMENT NUMBER: N09000007650
_____

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

Please return all correspondence concerning this matter to the following:

MARTA MARIA MEDINA MEMBIELA
_____
(Name of Person)

_____
(Name of Firm/Company)

6828 S.W. 114 AVENUE
_____
(Address)

MIAMI, FL 33173
_____
(City/State and Zip Code)

For further information concerning this matter, please call:

MARTA M. MEMBIELA   at (305) 270-9796
_____
(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

CR2E044(08/05)

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

I, __MARIA LUISA FERNANDEZ__, hereby resign as __DIRECTOR/SECRETARY__
(Title)

of __NEW ERA INSTITUTE, INC.__ ,
(Name of Corporation)

__N09000007650__, a corporation organized under the laws of the State of
(Document Number, if known)

__FLORIDA__ .

maria L Fernandez
(Signature of resigning officer/director)

5245 SW 89 Place
Miami, FL 33165

09 SEP 30 PH 2: 17

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