

PO0000009220

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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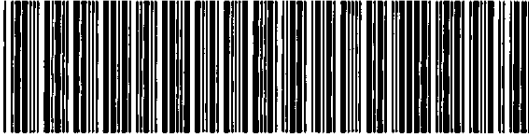
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

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LAW OFFICES OF

**SANTIAGO J. PADILLA, P.A.**

ATTORNEY AT LAW

1001 BRICKELL BAY DRIVE, SUITE 1704 • MIAMI, FLORIDA 33131

TELEPHONE: (305) 358-1949 • FACSIMILE: (305) 374-6495

E-MAIL: [sjp@padillalawoffice.com](mailto:sjp@padillalawoffice.com)

SANTIAGO J. PADILLA, ESQ.

July 26, 2007

VIA FIRST CLASS MAIL

Division of Corporations  
Amendment Section  
Florida Department of State  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: LATIN'S, INC., a Florida corporation  
Document No. P00000009220

Dear Sir/Madam:

Please be advised that I represent the above-referenced company. Enclosed herewith are the following documents that I hereby submit for filing: (i) Statement of Change of Registered Office/Agent; and (iii) Officer/Director Resignation for a Corporation. Also enclosed is a check in the amount of \$70.00 for the filing fees.

Thank you for your attention to this matter. Please call me if you have any questions or concerns.

Sincerely,

LAW OFFICES OF  
SANTIAGO J. PADILLA, P.A.

By: 

Name: Santiago J. Padilla

SJP/meh

Enclosures

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LATIN'S, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P00000009220

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

Please return all correspondence concerning this matter to the following:

Santiago J. Padilla, Esq.  
(Name of Person)

Law Offices of Santiago J. Padilla, P.A.  
(Name of Firm/Company)

1001 Brickell Bay Drive, Suite 1704  
(Address)

Miami, Florida 33131  
(City/State and Zip Code)

For further information concerning this matter, please call:

Santiago J. Padilla, Esq. at ( 305 ) 358-1949  
(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

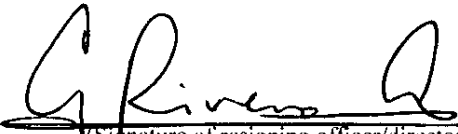
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Gabriela Ricote, hereby resign as Director and President  
(Title)

of LATIN'S, INC.  
(Name of Corporation)

P00000009220, 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

**FILED**  
**07 JUL 31 PM 2:00**  
**SECRETARY OF STATE**  
**TALLAHASSEE FLORIDA**