

P0000007472

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

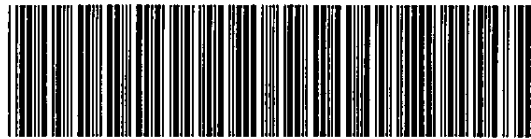
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Resign

C. Couliette NOV 16 2006

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Capital Gurantee Associates, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P00000017472

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

Please return all correspondence concerning this matter to the following:

Caridad Ceijas

(Name of Person)

Capital Gurantee Associates, Inc.

(Name of Firm/Company)

8001 NW 36 Street, #112

(Address)

Doral, FL 33166

(City/State and Zip Code)

For further information concerning this matter, please call:

Miguel Asencio
_____ at (305) 345-3822
(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

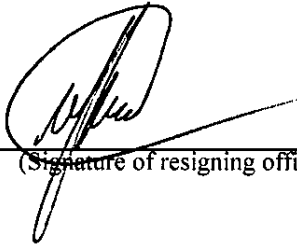
Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Miguel Asencio, hereby resign as Vice President
(Title)

of Capital Guarantee Associates, Inc.
(Name of Corporation)

P00000017472, 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

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