

P000000049104

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

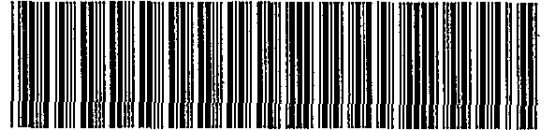
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Marlon Bryan Advised
to File Document to
Obtain letter referencing
the Officer Director
Resignation. 9/8/04 @

Office Use Only

OD/Res
@ 9/8/04



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09/01/04--01015--018 **35.00

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04 SEP - 1 PM 2:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: VARIEDADES LINA CORP.
(Name of Corporation)

DOCUMENT NUMBER: P00000049104

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

Please return all correspondence concerning this matter to the following:

MARLON E. BRYAN, ESQ.

(Name of Person)

LAW OFFICES OF MARLON E. BRYAN, P.A.

(Name of Firm/Company)

5701 SHERIDAN STREET

(Address)

HOLLYWOOD, FL 33021

(City/State and Zip Code)

For further information concerning this matter, please call:

MARLON E. BRYAN, P.A.

(Name of Person)

at (954) 252-7284

(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

04 SEP - 1 PM 2:40
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

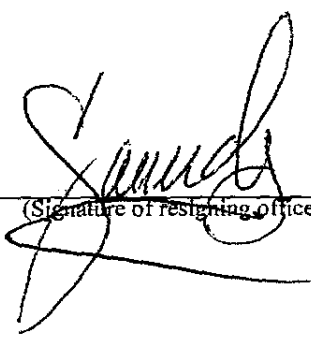
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, SANDRA SOLORZANO, hereby resign as SECRETARY
(Title)

of VARIEDADES LINA CORP.
(Name of Corporation)

P00000049104, 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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TALLAHASSEE, FLORIDA