PO1000006878

(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:		

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officer Presignation
TB 1/25/08

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT:	H & M BUSINESS CORP.
Sobile 1.	(Name of Corporation)
DOCUMENT NUMBER:	P01000006878
The enclosed Officer/Director Resig	nation for a Corporation and fee are submitted for filing
Please return all correspondence cor	ocerning this matter to the following:
Christina Pra	ts
(Name of Person	on)
Prats Fernande	z & Co.
(Name of Firm/Con	mpany)
2121 Ponce de Leon Bl	vd. Suite 240
(Address)	
Coral Gables, FL	33134
(City/State and Zip	Code)
For further information concerning t	his matter, please call:
Christina Prats	at (305) 444-8333 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made	e 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

FAX NO. :47726900-34

FROM:X4

ZOOB JUL 22 PM 12: 10
TALLAHASSEE. FLORIDA

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

HERNAN G. WESTMANN	, hereby resign as Pres., Secretary, Director
7 	(Title)
of _H & M BUSINESS CORP.	
(Name	of Corporation)
P01000006878 (Document Number, if known)	a corporation organized under the laws of the State of
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 Tallahasset, Florida 32314