

PO1000073178

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

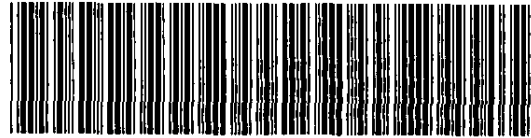
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800181310138

05/26/10--01008--006 \*\*35.00

*Handwritten signature*

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 MAY 26 PM 2:02

FILED

Roberts MAY 26, 2010

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** emerald professional consultants, inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P01000073178

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

Please return all correspondence concerning this matter to the following:

kathy peña  
(Name of Person)

emerald professional consultants, inc.  
(Name of Firm/Company)

9754 nw 49 ter,  
(Address)

doral, fl. 33178  
(City/State and Zip Code)

For further information concerning this matter, please call:

kathy peña at ( 305 ) 2982061  
(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**

**FILED**  
10 MAY 26 PM 2:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, kathy peña, hereby resign as president  
(Title)

of emerald professional consultants, inc.  
(Name of Corporation)

P01000073178, 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

STATE OF FLORIDA  
COUNTY OF Dade.

The foregoing instrument was acknowledge before me  
this 24 day of May, 20 10.  
by Katherine Peña.

Daylin Galindo  
Print, Type of Stamp name of Notary

Personally Known \_\_\_\_\_ or Produced Identification FDL.

Type of Identification Produced PS00-305-77-512-0

