101000099306

(Requ	estor's Name)	
(Addre	ess)	
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COVER LETTER

	Amendment Section Division of Corporations
SUBJE	CT:BELKIS ALF 1, INC.
	(Name of Corporation)
DOCU	MENT NUMBER: P01000099306
The enc	losed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please re	eturn all correspondence concerning this matter to the following:
YAIRE	EN ALVAREZ
,,,,,,	(Name of Person)
BELKI	S ALF 1, INC.
	(Name of Firm/Company)
3700 8	SW 147th PLACE
	(Address)
MIAMI	, FL 33185
	(City/State and Zip Code)
For furth	ner information concerning this matter, please call:
YAIREI	N ALVAREZ at (305) 487-6736 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed	d is a check for \$35.00 made payable to the Florida Department of State.
Division Clifton E 2661 Exc	Mailing Address: nent Section of Corporations Building ecutive Center Circle see, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

OT SEP 27 PM 4:45 **JOSE O ALVAREZ PRESIDENT** , hereby resign as (Title) of BELKIS ALF 1, INC. (Name of Corporation) P01000099306 , a corporation organized under the laws of the State of (Document Number, if known) **FLORIDA**

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