

P02000058107

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

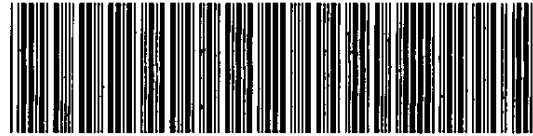
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 OCT 23 AM 10:53

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off. Resign.

TB

OCT 26 2009

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SUNRICE OF SOUTH FLORIDA, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P02000058107

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

Please return all correspondence concerning this matter to the following:

HERNAN F RAMIREZ

(Name of Person)

SUNRICE OF SOUTH FLORIDA, INC.

(Name of Firm/Company)

14041 SW 84 STREET

(Address)

MIAMI, FL 33183

(City/State and Zip Code)

For further information concerning this matter, please call:

HERNAN F RAMIREZ

(Name of Person)

at ( 954 ) 849-3190

(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**

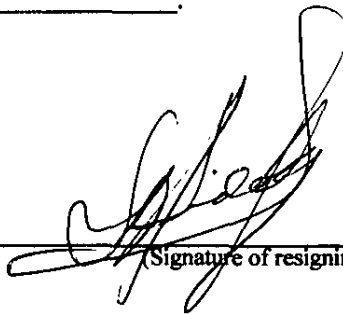
**FILED**  
2009 OCT 23 AM 10:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, FRANCISCO HIDALGO, hereby resign as Director  
(Title)

of SUNRICE OF SOUTH FLORIDA, INC.  
(Name of Corporation)

P02000058107, 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