TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	02 0CT
SUBJECT: KOROCOTE RESTAURANT, INC. (Name of corporation)	
DOCUMENT NUMBER: P02000072908	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for fight	
Please return all correspondence concerning this matter to the following:	
RAMON MARTE (Name of person)	
KOROCOTE RESTAURANT LNC 500083: (Name of firm/company) -10/14/0 *******35	
1180 N.W. 1195+ (Address)	
Miami, Fu 33167 (City/state and zip code)	nes C allin
For further information concerning this matter, please call:	
RAMON MARTE at (305) 687 - 8772 (Name of person) (Area code & daytime telephone number)	## ##
Enclosed is a \$35.00 check made payable to the Department of State.	

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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

CR2E045(07/02)

Ps 20/16/02-

OZ OCT 14 PM 1:45
AELAHASSEE FLORIDA

OFFICER / DIRECTOR RESIGNATION

I, JUSTO HERNANDEZ, hereby resign as Vice-Presiden.	VINCOR PORATOR
of KOrocote RESTAURANT, IKC (Name of Corporation)	1 - 1/4 - 4/4 - 1/4
(Name of Corporation)	
a corporation organized under the laws of the State of Florida	·
and affirm that the corporation has been notified in writing of the resignation.	φ =
(Signature of resigning officer/director)	

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314