P02000083432

(Requestor's Name)			
(Address)			
·			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Consisting Australian Australian Corr			
Special Instructions to Filing Officer:			

Office Use Only



400138119284

11/24/08--01022--009 **35.00

Op/likes

FILED STATENS
SECRETARY OF CORPORATIONS
ON 11: 24
ON 100 24 AM 11: 24

COVER LETTER

•	
SUBJECT: VIVEROS CO.	
	(Name of Corporation)
DOCUMENT NUMBER: P0200008	33432
The enclosed Officer/Director Resignation	n for a Corporation and fee are submitted for filing
Please return all correspondence concerni	ng this matter to the following:
Jaime Viveros	
(Name of Person)	
VIVEROS CO.	
(Name of Firm/Company	
11827 Eagle Ray Ln	
(Address)	· · · · · · · · · · · · · · · · · · ·
Orlando, FI 32827	
(City/State and Zip Code)
For further information concerning this m	atter, please call:
Jaime Viveros	at (321) 303-3350
(Name of Person)	at (321) 303-3350 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made paya	ble to the Florida Department of State.
Amendment Section Ame Division of Corporations Divi Clifton Building Post	ling Address: endment Section sion of Corporations Office Box 6327 ahassee, FL 32314

TO:

Amendment Section Division of Corporations



I, Alberto Viveros	, hereby resign as Officer/Director	
	,, <u></u>	(Title)
of Viveros Co.		-
(Na	me of Corporation)	
P02000083432 (Document Number, if known)	, a corporation organized under the	he 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 Tallahassee, Florida 32314