P02080093064

•
(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:
Special instructions to riving Officer.
·





700104797677

06/26/07--01005--024 **35.00

O/ JUN Z6 PM 3: 48
SECRETARY OF STATE
FALLAHASSEE, FLORID;

078 Resign

C. Coulliette JUN 2 8 2007

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: UNIDOS SERVICIOS DE INMIGRACION, INC.	
(Name of Corporation)	_
DOCUMENT NUMBER: P02000093064	_
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for fi	ling
Please return all correspondence concerning this matter to the following:	
BRYAN BUENAVENTURA	
(Name of Person)	
UNIDOS SERVICIOS DE INMIGRACION, INC.	
(Name of Firm/Company)	
1430 W. BUSCH BLVD., SUITE D	
(Address)	
TAMPA, FL 33612	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
CLAUDIA MEJIA at (813) 933-8820 (Name of Person) (Area Code & Daytime Telephone Numb	
(Name of Person) (Area Code & Daytime Telephone Numb	er)
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

I,	, hereby resign as PRESIDENT
	(Title)
of UNIDOS SERVICIOS DE IN	MIGRACION INC.
	ne of Corporation)
P02000093064 (Document Number, if known)	, a corporation organized under the 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:

SECRETARY OF STATE TALLAHASSEE, FLORIDA

07 JUN 26 PM 3: 4

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314