

P02000105012

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

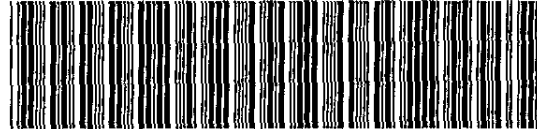
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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CRUZ'S RANCH CORP.

(Name of Corporation)

**DOCUMENT NUMBER:** P02000105012

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

Please return all correspondence concerning this matter to the following:

CALIXTO HERNANDEZ

(Name of Person)

CRUZ'S RANCH CORP.

(Name of Firm/Company)

1010 NORTH USA HIGHWAY 27

(Address)

CLEWSTON, FLA. 33440

(City/State and Zip Code)

For further information concerning this matter, please call:

AUGUSTO R. CRUZ

(Name of Person)

at ( 786 ) 367-3946

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, AUGUSTO R. CRUZ, hereby resign as PRES., DIR., TREA., SEC.  
(Title)

of CRUZ'S RANCH, CORP.  
(Name of Corporation)

P02000105012, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

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TALLAHASSEE, 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