

PO3000024647

(Requestor's Name)

(Address)

(Address)

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TALLAHASSEE, FLORIDA

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*Off Resign*

G. Ouellette JAN 27 2005

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ALLOROSA Services, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P030000 24647

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

Please return all correspondence concerning this matter to the following:

Cesar Delinois  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

12230 NW 19th Ave  
(Address)

Miami, FL 33167  
(City/State and Zip Code)

For further information concerning this matter, please call:

Cesar Delinois at (305) 6815784  
(Name of Person) (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, Cesar Delinois, hereby resign as officer  
(Title)

of ALLOROSA services, Inc.,  
(Name of Corporation)

903000024647, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida.

X Delinois Cesar  
(Signature of resigning officer/director)

FILED  
05 JAN 24 PM 2:01  
SECRETARY (F) STATE  
TALLAHASSEE FL 32314

**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