

PO30000036318

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

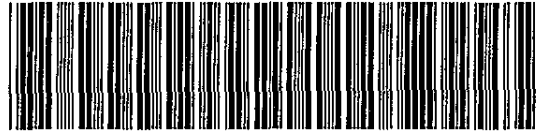
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04 OCT 27 PM 4:05
FALLAHASSEE, FLORIDA

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04 OCT 27 PM 4:05
CLERK OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CEDENO'S BROTHERS CORP.
(Name of Corporation)

DOCUMENT NUMBER: G04054900139

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

Please return all correspondence concerning this matter to the following:

LUIS CEDENO
(Name of Person)

CEDENOS BROTHERS CORP.
(Name of Firm/Company)

30070 S. DIXIE HWY
(Address)

MIAMI, FL 33033
(City/State and Zip Code)

For further information concerning this matter, please call:

PIERRE CEDENO at (305) 298-1830
(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**

FILED
04 OCT 27 PM 4:05
TALLAHASSEE, FLORIDA

I, LUIS CEDENO, hereby resign as VICE PRESIDENT
(Title)

of CEDENO'S BROTHERS CORP.
(Name of Corporation)

G04054900139, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

X Luis Cedeno S
(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