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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
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TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Unlimited Development Brup, Inc. (Name of Corporation)
DOCUMENT NUMBER: PO300039614
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Raul Ramos (Name of Person)
Intented Development Grap, Inc. (Name of Firm/Contpany)
119 Marin Oaks Blue Wit 600 (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (352) 2-66-0948 (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

TO: Amendment Section

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

	T TO T
I, Yazmin Ramos, hereby resign as Treasurer (Title)	FILED
of Unlimited Doubloment Group, Inc. (Name of Corporation)	FLORIED FLORIED
(Document Number, if known) a corporation organized under the laws of the Sta	ate 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