

PO3000047376

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

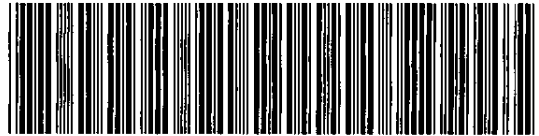
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300137605553

11/10/08--01028--014 **35.00

Off/Dir Design

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 NOV 10 AM 10:19

T. Roberts NOV 14 2008

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: THE ORIGINAL CAFETIN, CORP.
(Name of Corporation)

DOCUMENT NUMBER: P03000047376

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

Please return all correspondence concerning this matter to the following:

CHRISTINA M. AGUILAR

(Name of Person)

THE ORIGINAL CAFETIN, CORP.

(Name of Firm/Company)

6934 COLLINS AVENUE

(Address)

MIAMI BEACH FL 33141

(City/State and Zip Code)

For further information concerning this matter, please call:

CARLOS A. LOPEZ, JR.

(Name of Person)

at (305) 379-1600

(Area Code & Daytime Telephone Number)

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**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 NOV 10 AM 10:19

I, CHRISTINA M. AGUILAR, hereby resign as President; Vice-president
(Title)

of THE ORIGINAL CAFETIN, CORP.
(Name of Corporation)

P03000047376, a corporation organized under the laws of the State of
(Document Number, if known)

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