

P03000048821

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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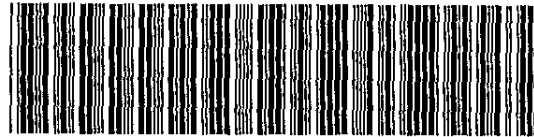
(Business Entity Name)

(Document Number)

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01 NOV - 1 AM 11:06
TALLAHASSEE, FLORIDA

11/9/04
RA Res.
SP

GARY S. RACKEAR

ATTORNEY AT LAW
5975 SUNSET DRIVE - SUITE 604
SOUTH MIAMI, FLORIDA 33143-5174

TELEPHONE: (305) 669-9989
TELECOPIER: (305) 669-1088

A_LAWYER@BELLSOUTH.NET

October 28, 2004

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Resignation of Registered Agent - KENNETH HERNANDEZ
Director/Officer Resignation for a Corp. -KENNETH HERNANDEZ
Tuto Homes, Corporation - P03000048821

Dear Sir or Madam:

Please find enclosed an Amended Annual Report for Tuto Homes, Corp., together with a check in the amount of \$61.25 to cover the cost of filing the same with your office.

Next is enclosed a letter of transmittal together with a signed Officer/Director Resignation Tuto Homes, Corp., and a check in the amount of \$35.00 to cover the cost of filing.

Lastly you will find enclosed, a signed Resignation of Registered Agent for that same Corporation together with a check in the amount of \$87.50 to cover the filing the same.

If there are any additional requirements to accomplish these resignations or if this request presents any problems, please contact me immediately.

Very truly yours

GARY S. RACKEAR

GSR: rra

Encls.

cc: Ken Hernandez

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, Florida

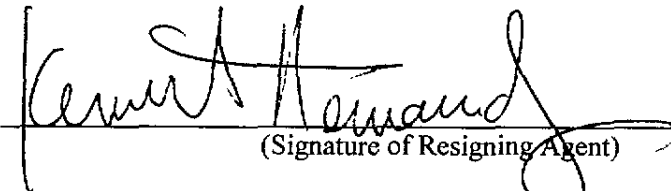
Statutes, the undersigned, KENNETH HERNANDEZ, hereby resign as
(Name of Registered Agent)

hereby resigns as Registered Agent for TUTO HOMES, CORP.
(Name of Corporation)

P 03000048821
(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which the statement is filed.


(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

FILED
04 NOV -1 AM 11:06
TALLAHASSEE, FLORIDA
DEPARTMENT OF STATE

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314