## PD3DD0012195

(Requestor's Name)	•
(Address)	_
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(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Sta	atus
Special Instructions to Filing Officer:	



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 28, 2006

BARBARA HERNANDEZ SINNES & HERNANDEZ, P.A. 8600 NW SOUTH RIVER DRIVE #101 MIAMI, FL 33166

SUBJECT: CROWN DESIGN & CONSTRUCTION, INC.

Ref. Number: P03000072195

We have received your document for CROWN DESIGN & CONSTRUCTION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have listed the wrong corporate name on the form.

MARJORIE RODRIGUEZ is listed as a (DIRECTOR) for CROWN DESIGN & CONSTRUCTION not RODCO CONSTRUCTION CORP.

Please correct your document to reflect the correct corporate name and the correct title for MARJORIE RODRIGUEZ.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Document Specialist

Letter Number: 406A00042719

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

•
SUBJECT: ZORTA CONSTRUCTION, INC.
(Name of Corporation)
DOCUMENT NUMBER: P03000072195
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
BARBARA HERNANDEZ
(Name of Person)
SINNES & HERNANDEZ, PA
(Name of Firm/Company)
8600 NW SOUTH RIVER DRIVE #101
(Address)
MIAMI, FLORIDA 33166
(City/State and Zip Code)
For further information concerning this matter, please call:
BARBARA HERNANDEZ  (Name of Person)  at (305) 885-5099  (Area Code & Daytime Telephone Number)
(Name of Person) (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

reby resign as DITECTOT (Title)
organized under the laws of the State of
ĭ

(Signature of resigning officer/director)

OF JIL 28 MAY DO

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