

✓ PO3000097353

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

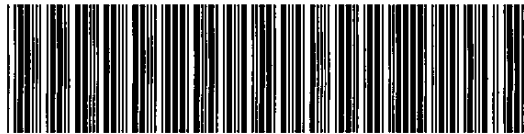
(Business Entity Name)

(Document Number)

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T. Roberts JUN 13 2006

06 JUN - 6 AM 8:55
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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LAS PALMERAS DOMINICANA, IN.
(Name of Corporation)

DOCUMENT NUMBER: P03000097353

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

Please return all correspondence concerning this matter to the following:

CARMEN JORGE

(Name of Person)

LAS PALMERAS DOMINICANA, INC.

(Name of Firm/Company)

7155 B. PEMBROKE ROAD

(Address)

PEMBROKE PINES, FL. 33023

(City/State and Zip Code)

For further information concerning this matter, please call:

PATRICIA SANCHEZ GARCIA

(Name of Person)

at (954) 894-3011

(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**

I, CARMEN JORGE, hereby resign as PRESIDENT & SECRETARY
(Title)

of LAS PALMERAS DOMINICANA, INC.,
(Name of Corporation)

P03000097353, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA



(Signature of resigning officer/director)

FILED
06 JUN - 6 PM 4:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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