

P04000008550

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

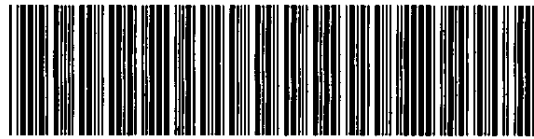
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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O/D Resign.

9/30/08

DC

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** 6425 CORPORATION  
(Name of Corporation)

**DOCUMENT NUMBER:** P04000008550

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

Please return all correspondence concerning this matter to the following:

JOSE E. CASTRO  
(Name of Person)

J. CASTRO & ASSOCIATES, P.A.  
(Name of Firm/Company)

6915 RED ROAD, SUITE 219  
(Address)

CORAL GABLES, FLORIDA 33143  
(City/State and Zip Code)

For further information concerning this matter, please call:

JOSE E. CASTRO at ( 305 ) 444-7500  
(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

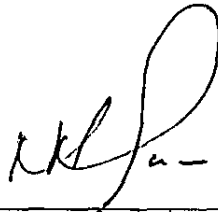
**Mailing Address:**  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, MERCEDES MASSO, hereby resign as PRESIDENT  
(Title)

of 6425 CORPORATION  
(Name of Corporation)

P04000008550, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida



(Signature of resigning officer/director)  
MERCEDES MASSO

**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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

00 SEP 16 PM 1:15

**FILED**