P04000054700

(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:
Special Instructions to Filing Officer: Corrulat downers by thehm can n 10/11/27
TR 10/11/27

Office Use Only



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10/16/07--01014--007 **35.00

Mr/Dir Resign

FILED 107 OCT 16 AMII: 33
SECRETARY OF STATE TALLAHASSEE. FLORID

COVER LETTER

Resignation of S/T Officer SUBJECT: (Name of Corpor	ation)
DOCUMENT NUMBER: P04000054700	
The enclosed Officer/Director Resignation for a Corporation	and fee are submitted for filing
Please return all correspondence concerning this matter to the	e following:
Jose F. Seara	
(Name of Person)	
La Cordobesa Food Products Corp.	
(Name of Firm/Company)	
7030 Northwest 37 Court	
(Address)	
Miami, Florida 33010	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
	447-1617
(Name of Person) (Area Code	e & 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

TO: Amendment Section Division of Corporations

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION FOR A CORPORATION FOR A CORPORATION FOR A CORPORATION FILED OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION FILED OFFICER / DIRECTOR RESIGNATION FALLAHASSEE. FLORIDA

Jose F. Seara	h	Secretary/Tresurer
fre	oducts."	(Title)
La Cordobesa Food Co		
	(Name of Corporation)	
P0400054700 (Document Number, if know	, a corporati	ion organized under the laws of the State of
,		
	De C	Seara
	(Signature of resi	gning 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