

PO4000076124

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

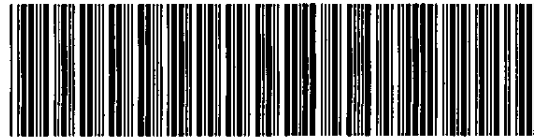
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

MAY 22 2006

Pp

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SOLDEVOLUTION CORP.
(Name of Corporation)

DOCUMENT NUMBER: P04000076184

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

Please return all correspondence concerning this matter to the following:

FELIX PAGES
(Name of Person)

SOLDEVOLUTION CORP.
(Name of Firm/Company)

8000 NW 31 STREET SUITE #5
(Address)

DORAL, FL 33122
(City/State and Zip Code)

For further information concerning this matter, please call:

FELIX PAGES at (305) 4636999
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

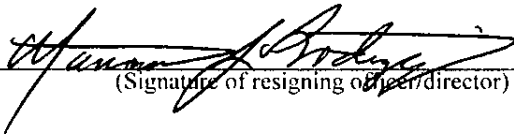
Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, MARIANO J Rodriguez, hereby resign as Secretary/Treasurer
(Title)
of SOLO EVOLUTION CORPORATION
(Name of Corporation)

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


(Signature of resigning 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

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TALLAHASSEE FLORIDA