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SECRETARY OF STATE

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## **COVER LETTER**

SUBJECT: Name of Corporation) DOCUMENT NUMBER: The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: 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

TO:

Amendment Section Division of Corporations

FILED

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION SECRETARY OF STATE

| , Orlando H             | EVNANCEZ, hereby resign     | as President                   |
|-------------------------|-----------------------------|--------------------------------|
|                         |                             | (Title)                        |
| of                      | (Name of Corporation)       | Inc.                           |
|                         | (Name of Corporation)       | *                              |
| P04000 148              | 141 a corporation organized | under the laws of the State of |
| (Document Number, if kn | own)                        |                                |
| Florida                 |                             |                                |

(Signature of resigning offices 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