

PD4000149883

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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MAIL

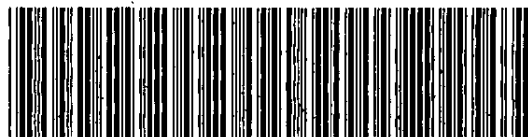
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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6-19-08

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** GATE 2 TEST, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P04000149883

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

Please return all correspondence concerning this matter to the following:

RAFAEL DIAZ DE LA ROCHA

(Name of Person)

GATE 2 TEST, INC.

(Name of Firm/Company)

248 NW LEJEUNE ROAD, #102

(Address).

MIAMI, FL 33126

(City/State and Zip Code)

For further information concerning this matter, please call:

RAFAEL DIAZ DE LA ROCHA at ( 786 ) 264-1997  
(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**

**FILED**

**2008 JUN 18 PM 3:49**

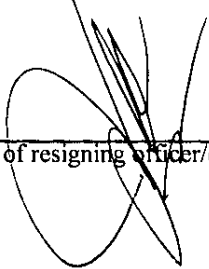
**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

I, JULIO F. VILLEGAS, hereby resign as STD  
(Title)

of GATE 2 TEST, INC.  
(Name of Corporation)

P04000149883, 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