

PD 8000041709

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

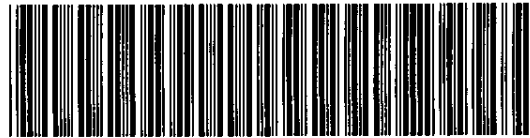
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12 FEB 21 PM 2:15

FILED

*O.F.F. Resign*

FEB 22 2012

T. LEWIS

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** RGMONTES INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P04000173025

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

Please return all correspondence concerning this matter to the following:

DILNEA DESOUZA BARBOSA  
(Name of Person)

RGMONTES INC  
(Name of Firm/Company)

10049 LAKE DISTRICT LANE  
(Address)

ORLANDO, FLORIDA 32832  
(City/State and Zip Code)

For further information concerning this matter, please call:

RENATO G MONTES at ( 321 ) 3886514  
(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**

**12 FEB 21 PM 2: 15**

**SECRETARY OF STATE  
TALLAHASSEE FLORIDA**

I, DILNEA DESOUZA BARBOSA, hereby resign as DIRECTOR  
(Title)

of RGMONTES INC  
(Name of Corporation)

P04000173025, 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