

PO5000054768

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

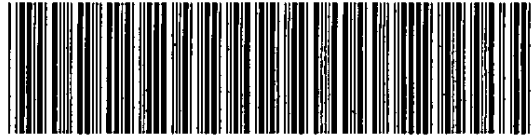
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6/13/08
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ESTETICA DENT MAXILO FACIAL, P.A.
(Name of Corporation)

DOCUMENT NUMBER: PD5000054768

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

Please return all correspondence concerning this matter to the following:

JESUS RODRIGUEZ
(Name of Person)

ESTETICA DENT MAXILO FACIAL, P.A.
(Name of Firm/Company)

470 Baltimore Way
(Address)

Coral Gables, FL 33134
(City/State and Zip Code)

For further information concerning this matter, please call:

Francisco Font at (305) 442-4874
(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**

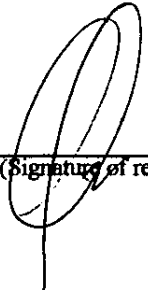
I, Jesus Rodriguez, hereby resign as vice president
(Title)

of Estética Dental Maxilo facial, P.A.
(Name of Corporation)

P05000054768, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Corp # FEI 202676248


(Signature of resigning officer/director)

2008 JUN 13 PM 2:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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