

PD5000072589

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

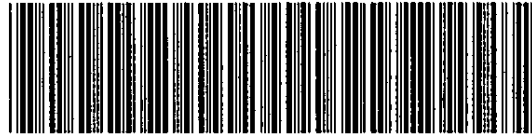
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Roberts SEP 15 2008
arts SEP 15 2008

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: JARA AND JARA USA INC.
(Name of Corporation)

DOCUMENT NUMBER: P05000072589

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

MICHAEL C. BROX
(Name of Person)

JARA AND JARA USA INC.
(Name of Firm/Company)

6025 NW 18 ST SUITE 601 BUILDING 716-E
(Address)

MIAMI FL 33126 US
(City/State and Zip Code)

For further information concerning this matter, please call:

MANUEL JARA at (305) 869 9988
(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**

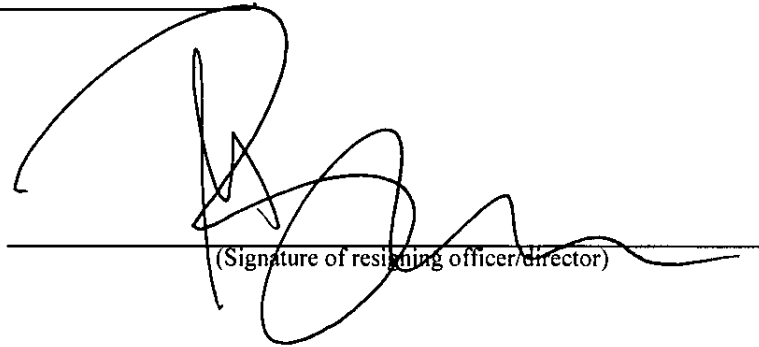
FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, MICHAEL C. BROX, hereby resign as TREASURER
(Title)

of JARA AND JARA USA INC, ORPLOCATED,
(Name of Corporation)

P05000072589, 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