P05000105372

| (Requestor's Name) | |
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| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
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| (Business Entity Name) | |
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| Certified Copies Certificates of Status | |
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| Special Instructions to Filing Officer: | |
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Office Use Only



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TO: Amendment Section Division of Corporations

SUBJECT: R & A & D Tovestor, INC.

(Name of Corporation)

DOCUMENT NUMBER: POSODO 105372

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

Please return all correspondence concerning this matter to the following:

Annando Person)

R & P & D Tovestor INC.
(Name of Firm/Company)

4312 S W 127 Pl.
(Address)

Minus Fl. 33175
(City/State and Zip Code)

For further information concerning this matter, please call:

Annando Person)

(Name of Person)

(Name of Person)

(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, ARMANDO PO AZCANÍO, hereby resign as V. P | Resident |
|---|--------------------|
| of R & A. & D Toves tor, 1 | NC |
| P05000105372, a corporation organized under the law (Document Number, if known) | vs of the State of |
| Florida | |
| (Signature of rysigning officer/director) | O6 MAR 20 / |
| FILING FEE IS \$35.00 | AHIO: 03 OF STATE |

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314