

PO5000111784

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

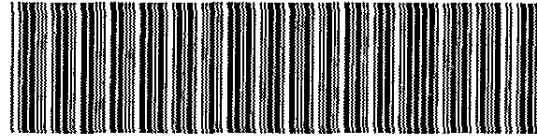
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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10/23/06--01027--012 \*\*35.00

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06 OCT 23 PM 1:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

00-5-2-01  
20-5-2-01  
00-5-2-01

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Director/President Designation  
(Name of Corporation)

**DOCUMENT NUMBER:** PO 5000 111784

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

Please return all correspondence concerning this matter to the following:

James Lawson A  
(Name of Person)

1170 St Claire Shore Rd  
(Name of Firm/Company)

Naples FL 34112  
(Address)

Tiempo de Sol, Inc  
(City/State and Zip Code)

For further information concerning this matter, please call:

Carolina Rojas or at (239) 677 8983  
(Name of Person) (Area Code & Daytime Telephone Number)  
James Lawson 2396013419

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, SILVIA CASABIANCA, hereby resign as Officer/Director/President  
(Title)

of Tiempas de Sol, Inc  
(Name of Corporation)

PO 5000 111784  
(Document Number, if known)

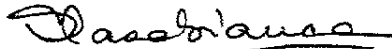
Florida

a corporation organized under the laws of the

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 OCT 23 PM 1:05

**FILED**



(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