

PO5000114275

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(Address)

(Address)

(City/State/Zip/Phone #)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MAXWELL Distributors, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P05000114275

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

Please return all correspondence concerning this matter to the following:

ARMANDO G. HERNANDEZ  
(Name of Person)

MAXWELL Distributors, Inc.  
(Name of Firm/Company)

3170 W 78<sup>th</sup> ST  
(Address)

HiALEAH, FL 33018  
(City/State and Zip Code)

For further information concerning this matter, please call:

ARMANDO HERNANDEZ at ( 305 ) 828-3161  
(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 G. Hernandez, hereby resign as VP  
(Title)  
of MAXWELL Distributors, Inc.  
(Name of Corporation)

PO5000114275, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

Armando G. Hernandez  
(Signature of resigning officer/director)

**FILED**  
06 JUL -5 AM 11:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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