

P 05000122801

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

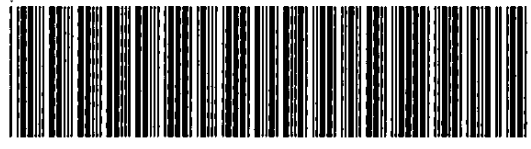
(Business Entity Name)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PALAMARES U.S.A. CORPORATION
(Name of Corporation)

DOCUMENT NUMBER: P05000122801

~~The enclosed Amendment and fee are submitted for filing.~~

~~Please return all correspondence concerning this matter to the following:~~

old Resignation

Rafael Castillo
(Name of Contact Person)

Palmares U.S.A. Corporation
(Firm/Company)

63 Lake Arbor Drive
(Address)

Lake Worth, Florida 33461
(City/State and Zip Code)

For further information concerning this matter, please call:

Rafael Castillo at (561 389-5955)
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35.00 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
- \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
OFFICER / DIRECTOR RESIGNATION

I, LUIS FERNANDO HERNANDEZ, hereby resign as STD
(Title)

of PALMARES U.S.A. CORPORATION
(Name of Corporation)

a corporation organized under the laws of the State of FLORIDA

and affirm that the corporation has been notified in writing of the resignation.

STD *Luis Fernando Hernandez*
(Signature of resigning officer/director)

FILING FEE IS \$35.00

**Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314**

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