

P05000151903

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

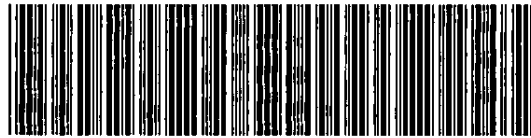
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

off. Resign.

TB

APR - 9 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LA FLORIDA 1 INC
(Name of Corporation)

DOCUMENT NUMBER: P05000151903

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

Please return all correspondence concerning this matter to the following:

JOSE A RAMOS
(Name of Person)

LA FLORIDA 1 INC
(Name of Firm/Company)

5510 JONQUIL CT #107
(Address)

NAPLES FL 34109
(City/State and Zip Code)

For further information concerning this matter, please call:

JOSE A RAMOS at (239) 287-1532
(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
2010 APR -6 AM 10:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, JOSE A RAMOS, hereby resign as PRESIDENT
(Title)

of LA FLORIDA 1 INC
(Name of Corporation)

P05000151903, 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