

P06000028042

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

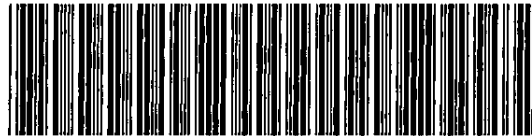
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 ~~D~~ Resign.

4/25/07

DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LA PLACITA SUPERMARKET # 1, INC.
(Name of Corporation)

DOCUMENT NUMBER: P060000028042

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

Please return all correspondence concerning this matter to the following:

EDWIN BERMUDEZ

(Name of Person)

LA PLACITA SUPERMARKET # 1, INC.

(Name of Firm/Company)

931 PONDELLA RD SUITE 7

(Address)

CAPE CORAL, FL. 33903

(City/State and Zip Code)

For further information concerning this matter, please call:

MARTA L. LONDONO

(Name of Person)

at (239) 995-5009

(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:

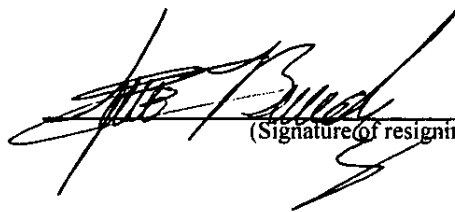
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, EDWIN BERMUDEZ, hereby resign as PRESIDENT
(Title)

of LA PLACITA SUPERMARKET # 1, INC.
(Name of Corporation)

P060000028042, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA



(Signature of resigning officer/director)

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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