

PO6000031669

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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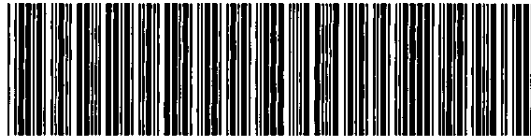
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Roberts MAY 16 2007

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Eagle's Father Corp.  
(Name of Corporation)

**DOCUMENT NUMBER:** P06 0000 31669

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

Please return all correspondence concerning this matter to the following:

Elayne Concepcion  
(Name of Person)

Eagle's Father Corp.  
(Name of Firm/Company)

7950 SW 8<sup>th</sup> St.  
(Address)

Miami, FL 33176  
(City/State and Zip Code)

For further information concerning this matter, please call:

Elayne Concepcion at ( 305 ) 788-3806  
(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, Rocke R. López, hereby resign as President  
(Title)

of Eagle's Father Corp  
(Name of Corporation)

PO 6000031669, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Rocke R. López  
(Signature of resigning officer/director)

**FILED**  
**07 MAY 11 PM 12:50**  
**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