

PD60000051576

(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  
DIVISION OF CORPORATIONS  
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OD/Res  
@ 5/14/11

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

SUBJECT: FERNANDEZ MACEDO CORP  
(Name of Corporation)

DOCUMENT NUMBER: 906 0000 51576

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

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

RAFAEL GABALDON  
(Name of Person)

PERSONAL

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(Name of Firm/Company)

4315 NW 7th St Ste 40  
(Address)

MIAMI FL 33126  
(City/State and Zip Code)

**For further information concerning this matter, please call:**

\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
(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, RAFAEL GABACON, hereby resign as Director President  
(Title)

of FERNANDEZ MACHADO CORP  
(Name of Corporation)

P06000051576, 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

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DIVISION OF CORPORATIONS  
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