P06000064555

(Re	questor's Name)			
(ive				
(Ad	ldress)			
•	•			
(Ad	dress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
<u></u>				

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Off Resign

2001 JUL 12 PM 12: 08
SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations				
SUB	JECT: COLINS INVESTMENTS, CORP.			
	(Name of Corporation)			
DOC	CUMENT NUMBER: P06000064555			
The	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing			
Pleas	se return all correspondence concerning this matter to the following:			
GU	STAVO CUENCA			
	(Name of Person)			
	(Name of Firm/Company)			
166	610 ROYAL PONCIANA CT.			
	(Address)			
WE	STON, FL 33326			
	(City/State and Zip Code)			
For f	further information concerning this matter, please call:			
GUS	STAVO CUENCA at (954) 254-8095 (Name of Person) (Area Code & Daytime Telephone Number)			
	(Name of Person) (Area Code & Daytime Telephone Number)			
Encl	osed is a check for \$35.00 made payable to the Florida Department of State.			
Ame Divis Clifte 2661	et Address: Indian Section Sion of Corporations On Building Executive Center Circle Wailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314			

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED

2007 JUL 12 PM 12: 08

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ANDRES F. MEDINA	, hereby resign as	DIRECTOR/SHAREHOLDER	
· · · · · · · · · · · · · · · · · · ·	, nesody resign as_	(Title)	
$_{ m of}$ colins investments, co			
(Name	e of Corporation)		
P06000064555 (Document Number, if known)	, a corporation organized un	der the laws of the State of	
FLORIDA		•	
	Adrit-Colf	•	
.	signature of resigning officer/direc	tor)	

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