

PO60000076741

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

CD/Res
@ 7.13.07



100105723441

07/10/07--01003--005 **35.00

FILED STATE
SECRETARY OF CORPORATIONS
07 JUL 10 PM 1:16

14.

4

Please return all correspondence concerning this matter to the following:

For further information concerning this matter, please call:

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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


**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, LEONEL ASPRILLA, hereby resign as Secretary.
(Title)

of EL Exito Supermarket, INC.
(Name of Corporation)

PO6000076741, 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

FILED STATE
SECRETARY OF CORPORATIONS
07 JUL 10 PM 1:16