

PO6000083252

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Order
6-1-07

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CALI TRANSFER INC.
(Name of Corporation)

DOCUMENT NUMBER: P06000083252

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

Please return all correspondence concerning this matter to the following:

Lourdes Corvo Esq.

(Name of Person)

Lourdes Corvo P.A.

(Name of Firm/Company)

15450 New Barn Rd Suite 302

(Address)

Miami Lakes, Florida 33014

(City/State and Zip Code)

For further information concerning this matter, please call:

Lourdes Corvo Esq.

(Name of Person)

at (305) 827-0084

(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

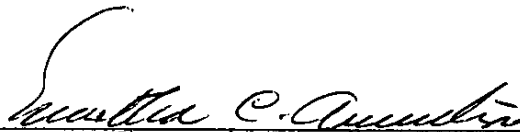
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Martha C. Armentero, hereby resign as Director
(Title)

of CALI TRANSFER, INC.
(Name of Corporation)

P06000083252, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

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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