## P06000117537

(Requestor's N	Name)	
(Address)		
(Address)	. (	
(City/State/Zip	/Phone #)	
PICK-UP WA	NT MAIL	
(Business Ent	ity Name)	
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08 JAN 24 PM 2: 53
SECRETARY OF STATE
FALLAHASSEE FLORID

Officer Resign Cin Menphy 2/1/08

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

BLUE HORSE	SHOE DEVELOPMENT
SUBJECT: BLUE HORSE	SHOE DEVELOPMENT (Name of Corporation)
DOCUMENT NUMBER:_	P06000117537
The enclosed Officer/Directo	r Resignation for a Corporation and fee are submitted for filing
Please return all corresponder	nce concerning this matter to the following:
GUSTAVO CALERO	
(Name	of Person)
BLUE HORSESHOE DE\	/ELOPMENT .
(Name of F	irm/Company)
8249 NW 36TH STREET,	SUITE 115
(Ad	dress)
DORAL, FL 33166	
(City/State	and Zip Code)
For further information conce	rming this matter, please call:
GUSTAVO CALERO	at ( 954 ) 652-8858
(Name of Perso	at ( 954 ) 652-8858 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.0	0 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. MONICA JARAMILLO	, hereby resign as VP	
***		Title)
ofBLUE HORSESHOE DEVELOPMENT	• 1	
(Name of Corpora P06000117537 , a corpo (Document Number, if known)	oration organized under the laws of th	ne State of
FLORIDA		
(Signature o	f resigning officer/director)	08 JAN 24 SEURETAR
FILING I	FEE IS \$35.00	
Make checks payable to Florid	a Department of State and mail to	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314