

P06000132701

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

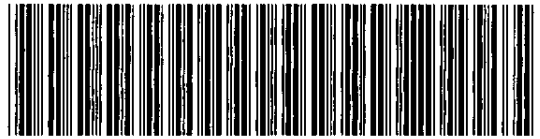
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TALLAHASSEE, FLORIDA

TB

11-20-07

officer Resignation

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: UMPA SYSTEMS, INC
(Name of Corporation)

DOCUMENT NUMBER: P06000132701

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

Please return all correspondence concerning this matter to the following:

Mauricio Montenegro

(Name of Person)

UMPA SYSTEMS, INC

(Name of Firm/Company)

2817 STATE ROAD 17 N

(Address)

SEBRING, FLORIDA 33870

(City/State and Zip Code)

For further information concerning this matter, please call:

Mauricio Montenegro

(Name of Person)

at (863) 382-2424

(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**

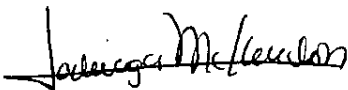
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Ludwiga McClendon, hereby resign as Vice President
(Title)

of UMPA SYSTEMS INC.
(Name of Corporation)

P06000132701, 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