## P06000134443

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	:y/State/Zip/Phone	<del>=</del> #)
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PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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DEURE TARY OF STATE
ALLAHASSEE, FLORIDA

office Risign Crin Wurphy 2/7/08

## **COVER LETTER**

SUBJECT: Set Vinter, Fuc. (Name of Corporation)  DOCUMENT NUMBER: PO6000/34443
(Name of Corporation)
DOCUMENT NUMBER: # 06000 134443
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Francia Penella (Name of Person)
(Name of Person)
Servinter, Tue, (Name of Firm/Company)
(Name of Firm/Company)
16220 SW 92 AVP.
(Madess)
Migmi, F/ 33 (City/State and Zip Code)
For further information concerning this matter, please call:
Francia Penella at (305) 345-9553 (Name of Person) (Area Code & Daytime Telephone Number)
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Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Amendment Section Division of Corporations

TO:

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, Ana C. hopes, hereby resign as Vice to	esident
of Servinter Inc (Name of Corporation)	
Pobooo 134443, a corporation organized under the laws of the (Document Number, if known)  Florida.	e State of
(Signature of resigning of Ker/director)	E]L
DIL INC DEE IS 225 00	PH 1:24
FILING FEE IS \$35.00	The state of the s

Make checks payable to Florida Department of State and mail to:

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