P07000014578

| (Requestor's Name) | |
|-----------------------------------------|------|
| | |
| (Address) | |
| | |
| (Address) | |
| | |
| (City/State/Zip/Phone #) | |
| | |
| PICK-UP WAIT I | MAIL |
| | |
| (Business Entity Name) | |
| (Busiless Entity Name) | |
| (Decreased Number) | |
| (Document Number) | |
| | |
| Certified Copies Certificates of Status | |
| | |
| Special Instructions to Filing Officer: | |
| · | |
| | |
| | |
| | |
| · | ! |
| | |
| | |

Office Use Only



500110958875

10/22/07--01044--009 **35.00

OT OCT 22 PHI2: 17
SECRETARY OF STATE

COVER LETTER

Amendment Section Division of Corporations

TO:

| SUBJECT: HUTES SWIVELS CORPORATION |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| (Name of Corporation) |
| DOCUMENT NUMBER: P07000016578 |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| HURTADO-NUNEZ, FRANCISCO L. |
| (Name of Person) |
| N.A |
| (Name of Firm/Company) |
| Fuente del Amor 319 Fracc. Las Fuentes |
| (Address) |
| Durango, Dgo. (México) |
| (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| HURTADO-NUNEZ, FRANCISCO L. at (618) 833 6493 (Name of Person) (Area Code & Daytime Telephone Number) |
| (Name of Person) (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, HURTADO-NUNEZ, FRANCIS | SCO L, | hereby resign as | VP | | <u>. </u> |
|-------------------------------------------|-----------------|----------------------|-----------------|-----------------------------------------------------------------|----------------------------------------------|
| | | | | (Title) | |
| of HUTES SWIVELS CORPORA | | <u> </u> | | | ····· |
| (Name | of Corporation | 1) | | | |
| P07000016578 (Document Number, if known) | , a corpora | tion organized u | nder the laws o | f the State of | |
| FLORIDA | <u>_</u> . | | | | |
| | Signature of re | signing officer/dire | ctor) | 07 OCT 22 PH 12: 17 SECRETARY OF STATE LLAHASSEE. FLORIDA | FILED |

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