## 70001924/

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

102609



600161752466

10/23/09--01004--020 \*\*35.00.

FILED

2009 OCT 23 PM II: 57
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUB.	JECT: TECNICA LEO, INC.
	(Name of Corporation)
DOC	CUMENT NUMBER: P07000019241
The e	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Pleas	e return all correspondence concerning this matter to the following:
MIC	CHAEL K. FISH CPA
	(Name of Person)
MIC	CHAEL K. FISH, CPA
	(Name of Firm/Company)
770	0 N. KENDALL DRIVE # 606
	(Address)
MIA	MI, FL 33156
	(City/State and Zip Code)
For f	urther information concerning this matter, please call:
МІС	HAEL K. FISH CPA at ( 305 ) 279-8484  (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Encl	osed is a check for \$35.00 made payable to the Florida Department of State.
Ame Divis Clifto 2661	Mailing Address: Amendment Section Sion of Corporations On Building Executive Center Circle hassee, FL 32301  Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

<sub>I.</sub> LUIS ODON	, hereby resign as DIRECTOR	
,	(Title)	
of TECNICA LEO, INC.		
	me of Corporation)	
P07000019241	_, a corporation organized under the laws of the State of	
(Document Number, if known)		
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