

P07000125077

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

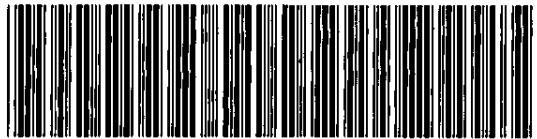
(Business Entity Name)

(Document Number)

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O/D Resign.  
01/16/08  
DC

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ARENAS FOOD SERVICES INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P07000125077

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ARENAS, VALENTIN A  
(Name of Contact Person)

ARENAS FOOD SERVICES INC.  
(Firm/Company)

3672 Southpointe Dr  
(Address)

ORLANDO, FL 32822  
(City/State and Zip Code)

For further information concerning this matter, please call:

VALENTIN A. ARENAS at ( 407 ) 380-0811  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

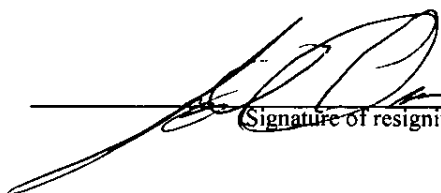
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, ARENAS, JORGE L, hereby resign as PRESIDENT  
(Title)

of ARENAS FOOD SERVICES INC.  
(Name of Corporation)

P07000125077, 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**

**FILED**  
08 JAN -9 AM 11:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

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