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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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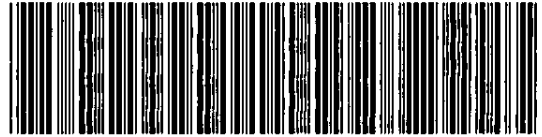
(Business Entity Name)

(Document Number)

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10 MAR -3 PM 2:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

OD/Res  
@ 3/5/10

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Miami Architect Designs, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** \_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Alcantara Gonzalo Jean-Paul  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)  
2627 South Bayshore Drive  
Apt. 1408  
(Address)

Coconut Grove, FL 33133  
(City/State and Zip Code)

For further information concerning this matter, please call:

Alcantara Gonzalo Jean-Paul at (305) 815-2400  
(Name of Person) (Area Code & Daytime Telephone Number)

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

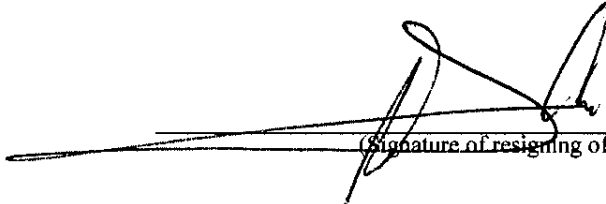
**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Mailing Address:**  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Gonzalo J. Alcantara hereby resign as Vice President / Secretary  
(Title)  
of Miami Architect Designs, Inc.  
(Name of Corporation)

\_\_\_\_\_, 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

10 MAR -3 PM 2:33

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA