P080000000315

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
,	,	
(C:+	:y/State/Zip/Phon	- 10
(Cit	y/State/Zip/Prion	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
·	ŕ	
(Do	cument Number	
(DC	cament Number,	,
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	······
		ł

Office Use Only



800135521228

09/15/08--01043--022 **35.00

OB SEP 15 PM 1:49

00/25

COVER LETTER

Amendment Section Division of Corporations

TODOVISAS ORGANIZATION INC **SUBJECT:** (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: MARIANA MONTESINO (Name of Person) TODOVISAS ORGANIZATION INC (Name of Firm/Company) 162 NW 207 AVE (Address) PEMBROKE PINE FL 33029 (City/State and Zip Code) For further information concerning this matter, please call: MARIANA MONTESINO (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Mailing Address: **Street Address:** Amendment Section
Division of Corporations Amendment Section Division of Corporations Clifton Building Post Office Box 6327 Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. HAIDE J ALDANA	, hereby resign as PRESIDENT		
	(Title)		
of TODOVISAS ORGANIZATION	I INC of Corporation)		
P0800006315 (Document Number, if known)	_, a corporation organized under the laws of the State of		
FLORIDA	•		
He aydu	SECRETARY OF STATE OF CORPORATION 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