

P08000037745

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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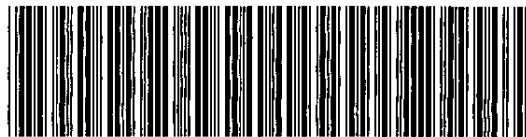
(Business Entity Name)

(Document Number)

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2008 MAY 23 PM 1:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

officer Resignation

TB

5/29/08

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LEON-IBARRA ALL SERVICES, CORP.  
(Name of Corporation)

**DOCUMENT NUMBER:** P08000037745

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

Please return all correspondence concerning this matter to the following:

MISLEIDY IBARRA

(Name of Person)

LEON-IBARRA ALL SERVICES, CORP.

(Name of Firm/Company)

5701 SW 109 AVENUE

(Address)

MIAMI, FL. 33173

(City/State and Zip Code)

For further information concerning this matter, please call:

MISLEIDY IBARRA

(Name of Person)

at ( 786 ) 348-6309

(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**


**FILED**  
2008 MAY 23 PM 1:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, IVAN LEON, hereby resign as PRESIDENT  
(Title)

of LEON-IBARRA ALL SERVICES, CORP  
(Name of Corporation)

P08000037745, 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