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| Special Instructions to | Filing Officer: | | | |
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COVER LETTER

| TO: Amendment Section Division of Corporations |
|--|
| SUBJECT: AGM OF SWF, INC (Name of Corporation) |
| DOCUMENT NUMBER: <u>P 09 0000 /3 / 73</u> |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing |
| Please return all correspondence concerning this matter to the following: |
| LEIDY A. CEDENO (Name of Person) |
| AGM OF SWF, INC (Name of Firm/Company) |
| 314 SW 26th Pl (Address) |
| CAPE CORAL, FL 33991 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| LEIDY A. CEDENO at (239) 898-9719 (Name of Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for \$35.00 made payable to the Florida Department of State. |

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

CR2E044(08/05)

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| I, Josue J. Molina, hereby resign as SECRETARY (STD) |
|---|
| of ASM OF SWF INC. (Name of Corporation) |
| P 09 0000 / 3 / 7 3 a corporation organized under the laws of the State of |
| (Document Number, if known) FLORIDA |
| 1 600.07 |
| |
| (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