## P09000031759

•		
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: EL RINCON RESTAURANT CORPORATION	
(Name of Corporation)	
DOCUMENT NUMBER: P09000031759	,
The enclosed Officer/Director Resignation for a Corporation and fee are subr	nitted for filing.
Please return all correspondence concerning this matter to the following:	••
SYLVIA ALVAREZ	<b>09 /</b> SEG TALL
(Name of Person)	FIL APR 23 GRETARI LAHASSI
AAA BROTHERS ENTERPRISES, INC	
(Name of Firm/Company)	ED Amio: Of STA E, Flor
1000 LEE BLVD, UNIT #210	o: 13 Tate Orid
(Address)	<b>P</b> —
LEHIGH ACRES, FL 33936	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
SYLVIA ALVAREZ at ( 239 ) 645-0375	
(Name of Person) (Area Code & Daytime Telep	phone 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

<sub>I</sub> MARIA DIAZ	, hereby resign as_	VICE PRES, TREASURER
• )		(Title)
of EL RINCON RESTAURA		,
	(Name of Corporation)	
P09000031759	, a corporation organized un	der the laws of the State of
(Document Number, if known)		· PL SE
FLORIDA		FIL 09 APR 23 SECKETAR ALLAHASS
		STA LOR
111		TE BDA
Mou	(Signature of resigning officer/direction	tor)

## 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