P09000038236

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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resignation Of officer

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2009 JUN-1 PH 4: 07
SECRETARY OF STATE
TALLAHASSEE, FLORIB

ADR 6/3/09

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: LA LECHONERA CRIOLLA #2, Corp (Name of Corporation) DOCUMENT NUMBER: 0900038236
DOCUMENT NUMBER: <u>V 09 00 00 38 236</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:
Name of Person)
DAVILA & JONNES PA (Name of Firm/Company)
GIINMAIN ST_STEJS (Address)
KISSI MMEE, EL.34744 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (407) 933-0307 (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

FILED

OFFICER / DIRECTOR RESIGNATION

FOR A CORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLOORES

I, _	CEFERINO ACEVEDO, hereby resign as Mce President (Title)
	(Title)
of_	LA LECHONERA CRIOLLA #2, CORP (Name of Corporation)
	P0900038236, 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