

P090000063304

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

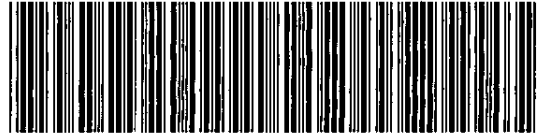
(Business Entity Name)

(Document Number)

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2009 SEP -2 PM 4:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

off. Resign.

TB

SEP - 4 2009

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** EL DORAL BUSINESS SOLUTIONS, CORP  
(Name of Corporation)

**DOCUMENT NUMBER:** P09000063304

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

Please return all correspondence concerning this matter to the following:

LUISA INCIARTE

(Name of Person)

EL DORAL BUSINESS SOLUTIONS, CORP

(Name of Firm/Company)

9737 NW 41 ST. # 340

(Address)

MIAMI, FL. 33178

(City/State and Zip Code)

For further information concerning this matter, please call:

LUISA INCIARTE

(Name of Person)

at ( 786 ) 3256513

(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**  
2009 SEP -2 PM 4:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, ADALBERTO CRUZ, hereby resign as CEO  
(Title)

of EL DORAL BUSINESS SOLUTIONS, CORP  
(Name of Corporation)

P09000063304, 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