P09000096582

	7			
· (Red	questor's Name)			
(Address)				
(Add	dress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL MAIL		
(But	siness Entity Nar	me)		
	-			
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
Special Instructions to Filing Officer:				
		ļ !		

Office Use Only



300183089393

08/02/10--01020--004 **35.00

SECRETARY OF STATE



COVER LETTER

TO: Amendment Section Division of Corporations			
	SUBJECT: CUBAMIA TRANEL INC - (Name of Corporation)		
	• • • • • • • • • • • • • • • • • • • •		
	DOCUMENT NUMBER:		
	The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filin	g	
	Please return all correspondence concerning this matter to the following:	٠.	
	(Name of Person)		
	(Name of Person)		
	CUBADIA TRAVER INC.		
,	(Name of Firm/Company)		
POBOX 651035 - (Address)			
	(Address)		
	(City/State and Zip Code)		
	(City/State and Zip Code)		
	For further information concerning this matter, please call:		
	1/20/70 170000 01/305 266-8755		
_	(Name of Person) at (305) 266-8255 (Area Code & Daytime Telephone Number)		
	Enclosed is a check for \$35.00 made payable to the Florida Department of State.		
	The same with the control of the con		
	Street Address: Mailing Address:		
	Amendment Section Amendment Section		
	Division of Corporations Clifton Building Division of Corporations Post Office Box 6327		
	2661 Executive Center Circle Tallahassee, FL 32314		
•	Tallahassee, FL 32301		

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

_I	ISEL L. DELCADO	. hereby resign as—	VP DIRECTOR
-,		,	(Title)
•			
of	CUBAMIA TRANE	L. INC	,
	(Name o	f Corporation)	
	Pogooo 96582 (Document Number, if known)	"a corporation organized under	the laws of the State of
	. FLORIDA.		
			•

FILING FEE IS \$35.00

ignature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 SECRETARY OF SIAIC

AND