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TALLAHASSEE, FLORIDA

COVER LETTER

SUBJECT: Long & Cespedes Low Firm, P.A. (Name of Corporation)					
DOCUMENT NUMBER: P1000033025					
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Ernesto Cespedes Scott Long (Name of Person)					
Long of Cospedes Low Firm, P.A. Long & Cospedes Low Firm (Name of Firm/Company)					
P.O. Box 811891 (Address) (Address)					
Boca Raton, F.J. 33481 (City/State and Zip Code) Boca Raton, F.J. 33431					
For further information concerning this matter, please call:					
Ernecto Cespedes at (S6) 922-8870 (Area Code & Daytime Telephone Number)					

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

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

i, Ernesto	Cespedes	, hereby resign as \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ce-President (Title)
of long t	Ces pedes L Name of Corporatio	tw Firm,	P. A ,
P100000 33 (Document Number	, if known), a corpora	ation organized under the	laws of the State of
Florida			•
			TASE OF THE
	(Signature of re	esigning officer/director)	CKARSSEE IN PAIN
	(Signatury of N		2:75 FLORIO

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