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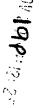
| (Re | equestor's Name) | |
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| | | |
| (Cit | ty/State/Zip/Phone | e #) |
| | | <u></u> |
| PICK-UP | WAIT | MAIL |
| | | |
| (Bu | siness Entity Nar | ne) |
| | | |
| (Ďo | cument Number) | |
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| Certified Copies | _ Certificates | s of Status |
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| Consist Instructions to | Filing Officers | |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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11/19/10--01017--010 **35.00





COVER LETTER

| TO: | Amendment Section Division of Corporations | |
|---------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| SUB. | BJECT: Caribe Bakery, Inc | |
| | (Name of Corporation) | |
| DOC | DCUMENT NUMBER: P10000083488 | |
| The e | e enclosed Officer/Director Resignation for a Corporation and fee | are submitted for filing |
| Pleas | ease return all correspondence concerning this matter to the follow | ing: |
| Ann | nmary Hidalgo | |
| | (Name of Person) | |
| Cari | aribe Bakery, Inc | |
| | (Name of Firm/Company) | |
| 135 | 351 N. Goldenrod Road Ste 123 | |
| | (Address) | |
| Orla | rlando, FL 32807 | |
| | (City/State and Zip Code) | |
| For fu | r further information concerning this matter, please call: | |
| Anal | nabelle Torres at (407) 970-7 (Name of Person) (Area Code & Dayti | 649 |
| | (Name of Person) (Area Code & Dayti | me Telephone Number) |
| Enclo | closed is a check for \$35.00 made payable to the Florida Departme | ent of State. |
| Amer Divis Clifte 2661 | reet Address: mendment Section vision of Corporations fton Building 61 Executive Center Circle Ilahassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314 | |

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| _{I.} Maryann Hidalgo | , hereby resign as Vice President | |
|-------------------------------|----------------------------------------------------------|--|
| 7 | (Title) | |
| | | |
| of Caribe Bakery, Inc | | |
| (Na | me of Corporation) | |
| P10000083488 | , a corporation organized under the laws of the State of | |
| (Document Number, if known) | | |
| Florida | | |

Maryan Hedalzo
(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