

PP9000036066

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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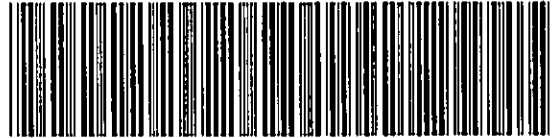
(Business Entity Name)

(Document Number)

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old Resignation

JAN 08 2014

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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DEL SUR INTERNATIONAL S.A., CORP.  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P19000036066  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

KATHERINE TERMINI

\_\_\_\_\_  
(Name of Person)

DEL SUR INTERNATIONAL S.A., CORP.

\_\_\_\_\_  
(Name of Firm/Company)

11563 NW 80th Street

\_\_\_\_\_  
(Address)

Medley, FL 33178

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

KATHERINE TERMINI 954 224-7526  
\_\_\_\_\_  
(Name of Person) at ( )  
(Area Code & Daytime Telephone Number)

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

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
19 00 25 AM '89

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, KATHERINE TERMINI, hereby resign as DIR  
(Title)

of DEL SUR INTERNATIONAL S.A., CORP.  
(Name of Corporation)

P19000036066

(Document Number, if known), a corporation organized under the laws of the State of  
Florida

Katherine Termini  
(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

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SECTION OF STATE  
19 JUN 05 PM 11:13