

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
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(Do	cument Number)	
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
		

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: CAFECITO EL EDEN, CORP	
(Name of Corporation)	_
DOCUMENT NUMBER: P19000054070	
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for f	iling.
Please return all correspondence concerning this matter to the following:	
YUNIOR LOPEZ	
(Name of Person)	
CAFECITO EL EDEN, CORP	

(Name of Firm/Company)

5901 NW 151ST STREET UNIT 104 B

(Address)

MIAMI LAKES, FL 33014

(City/State and Zip Code)

For further information concerning this matter, please call:

YUNIOR LOPEZ
(Name of Person)
at (954) 2498097
(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
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, EDEN J. HERRERA	, hereby resign as PRESIDENT
of CAFECITO EL EDEN,	(1.110)
(Name of Corp	oration) orporation organized under the laws of the State of
(Signatu	re of resigning officer/director) 20 20 21 2
FILIN	다. (구)

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

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