P93000	2929000
(Requestor's Name) (Address)	700078812237
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	08/17/0601040010 **35.00
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Les Copes on the Beach, INC. (Name of Corporation) DOCUMENT NUMBER: P9300009292

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

Maria Miranda (Name of Person) Copas on the Beach, Ine (Name of Firm/Company) Collins Ave (Address) <u>Mizmi Beach, FL 33140</u> (City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person) at (786) 255-0527 (Name of Person) (Area Code & Daytime Telephone Number)

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

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

r,

CR2E044(08/05)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, JUZN <u>Gowzalez</u> hereby resign as <u>President Director</u> & Treasurer the Beach (Name of of DODDO09292 (Document Number, if known) 000009 ___, a corporation organized under the laws of the State of FLORI

06 AUG 17 PH 4:00

(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