P93000069592

(Re	questor's Name)	<u>.</u>
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ZOLL AUG. 18 AM 8:

off. Resign.
TBrown

TBrown 8-22-11

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	JECT: AMERICAN TRAVEL & TOURS OF MIAMI CO.
~	(Name of Corporation)
DOC	UMENT NUMBER:P93000069592
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please	e return all correspondence concerning this matter to the following:
DOL	ORES CASTRO
	(Name of Person)
AME	ERICAN TRAVEL & TOURS OF MIAMI CO.
	(Name of Firm/Company)
255	2 NW 7 ST
	(Address)
MłA	MI, FL. 33125
	(City/State and Zip Code)
For fu	orther information concerning this matter, please call:
DOL	ORES CASTRO at (305) 541-0450 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	sed is a check for \$35.00 made payable to the Florida Department of State.
Amen Divisi Cliftor 2661 I	Mailing Address: dment Section on of Corporations on Building Executive Center Circle assee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



I. MANUEL CASTRO	, hereby resign as VP
<u> </u>	(Title)
$_{ m of}$ AMERICAN TRAVEL & TOURS	OF MIAMI, CO.
	Corporation)
P93000069592 (Document Number, if known)	a corporation organized under the laws of the State of
FLORIDA	
	nature 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