P930000084133

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Otty/Otate/2ip/i Holie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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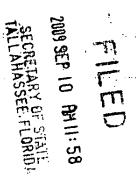
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resignation

09/10/09--01023--023 **35.00



ROR 9/15/09

COVER LETTER

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SUBJECT: Rodliquez, Alonson + Essington, P.A. DOCUMENT NUMBER: P93000084133
DOCUMENT NORMAN
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jonathan Aronson (Name of Person)
Rodriguez, Aronson & Essington S.A. (Name of Firm/Company)
2121 Ponce de Leon Blvd. #730 (Address)
Corel Gibles FL 33134 (City/State and Zip Code)
For further information concerning this matter, please call:
Michael Essington at (305) 282 1783 (Name of Person) at (305) 282 1783 (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
Post Office Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

SECRETARY OF STATE

ALLAHASSEE, FLORIDI

I, Michael P. Essington, hereby resign as Director

(Title)

Of Rodiguez & Amson P.A.

(Name of Corporation)

P936000 84133

, a corporation organized under the laws of the State of

(Document Number, if known)

Florids

(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

 $S_{j,k}$