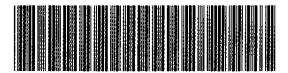
## P9400004352

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

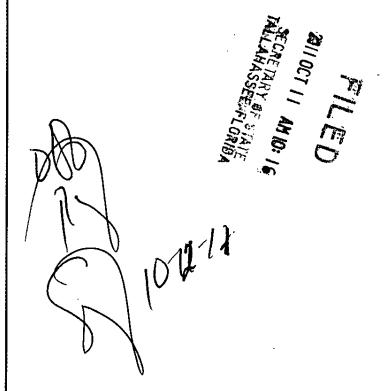
Office Use Only



300213168613

FILING CANCELLED RETURNED CHECK

10/11/11--01037--015 \*\*35.00



## **COVER LETTER**

ZAMORANO ENTERPRISES, INC.
SUBJECT: ZAMORANO ENTERPRISES, INC. (Name of Corporation)
DOCUMENT NUMBER: P9400004352
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
DIGNA CABRERA
(Name of Person)
ONE STOPO SOLUTION BOOKKEEPING \$ ACCOL
(Name of Firm/Company)
10621 N. KENDALL DR. SUITE # 113
(Address)
MIAMI, FL 33176
(City/State and Zip Code)
For further information concerning this matter, please call:
DIGNA CABRERA 21 ( 786 ) 210-6476
DIGNA CABRERA at ( 786 ) 210-6476  (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

TO:

Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, MANUEL ORTEGA	, hereby resign as PRESIDENT
7	(Title)
of_ZAMORANO ENTERPRIS	
7)	lame of Corporation)
P9400004352 (Document Number, if known)	, a corporation organized under the laws of the State of
FLORIDA	ALLAH)
Man	(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