

P94000004352

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

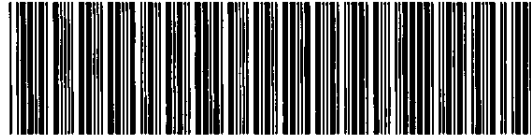
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500240540615

10/08/12--01021--004 **35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
OCT 8 AM 10:53

FILED

Off design

OCT 10 2012

T. LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ZAMORANO ENTERPRISES, INC.
(Name of Corporation)

DOCUMENT NUMBER: P94000004352

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 \$ ACCOI
(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 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

FOR A CORPORATION

FILED

17 OCT -8 AM 10:53

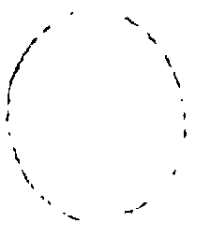
I, MANUEL ORTEGA, hereby resign as PRESIDENT
(Title)

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

of ZAMORANO ENTERPRISES, INC.
(Name of Corporation)

P9400004352, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA



Manuel Ortega
(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