## P95000019396

(Requestor's Name)
(Address)
(Address)
(1,001000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





000116632180

02/04/08--01039--023 \*\*35.00

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SECRETARY OF STATE

2/4 2/4

## **COVER LETTER**

(Name of Cor	poration)		
DOCUMENT NUMBER: P95000019396			
The enclosed Officer/Director Resignation for a Corpora	tion and fee are submitted for filing.		
Please return all correspondence concerning this matter to	o the following:		
Richard A, Alayon			
(Name of Person)	_		
Alayon & Associates, P.A.			
(Name of Firm/Company)	<del></del>		
4551 Ponce De Leon Boulevard			
(Address)			
Coral Gables Florida 33146	SECI	08 F	
(City/State and Zip Code)	— AREL	<u>-</u>	T
For further information concerning this matter, please cal	M: SSE	<del>*-</del>	
Jorge E. Isaac at ( 786	いら、457-5057 デル	PH	
	Code & Daytime Telephone Number)	2: 17	

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

Amendment Section Division of Corporations

TO:

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Jorge E. Isaac	, hereby resign as Vice President	
	(Title)	
of Alayon & Associates, P.A.		
	ne of Corporation)	
P95000019396	, a corporation organized under the laws of the State of	
(Document Number, if known)		
Florida		
	<del></del> ·	
The second secon	7 \	

FILING FEE IS \$35.00

ature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

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