P950003093A

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e#)
PICK-UP	WAIT	MAIL
(Ви	isiness Entity Nar	me)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only

White District Control of the Cont



400041356004

09/27/04--01082--002 **70.00

FILED

O4 SEP 28 PM 4: 21

TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations
SHBJ	ECT:_Multivalores, Inc.
SODO	(Name of Corporation)
DOC	UMENT NUMBER: P95000030932
The en	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please	return all correspondence concerning this matter to the following:
Judit	h Kenney
	(Name of Person)
Mon	tello & Kenney, P.A.
	(Name of Firm/Company)
777	Brickell Avenue, Suite 1070
	(Address)
Mian	nì, FL 33131
	(City/State and Zip Code)
For fu	ther information concerning this matter, please call:
Judith	(Name of Person) at (305) 373-0300 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclos	ed is a check for \$35.00 made payable to the Florida Department of State.
Amend Division P.O. B	Ig Address: Idment Section On of Corporations Ox 6327 Amendment Section Division of Corporations Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32314 Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Marcela Sevilla-Sacasa	hereby resign as Authorized Signer
	(Title)
of_ Multivalores, Inc.	
(Name	of Corporation)
P95000030932	a corporation organized under the laws of the State of
(Document Number, if known)	- Survey - S
Florida	
- M	O4 SEP 28 PM 4: 28 Signature of resigning officer/director) TALLAHASSEE, FLORIDA TO STATE TO

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