## P9500053438

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

Office Use Only



900062247539

12/22/05--01014--020 \*\*35.00





## **COVER LETTER**

SUBJECT: LUNA INVEST MENTS, CORP. (Name of Corporation)
DOCUMENT NUMBER: P 9500052428
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JORGE A hodriguez (Name of Person)
J. A. Rodriguez, CPA & Associates (Name of Firm/Company)
6401 SW 87th Ave Ste 210
City/State and Zip Code)
For further information concerning this matter, please call:
Tokka hodputure at (305) 595 1783  (Name of Person) (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

CR2E044(08/05)

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

I, Lissette	Rode i 6002, hereby resign as PRO	asidant (Title)
of LUNA I	Name of Corporation)	<b>,</b>
P 95 0000 S 3 (Document Number,	2428 , a corporation organized under the if known)	laws of the State of
Florida	<del> </del>	
	(Signature of resigning officer/director)	
	FILING FEE IS \$35.00	FILI 05 DEC 22 SECRETARY TALLAHASSF

Make checks payable to Florida Department of State and mail to Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, Florida 32314