

P95000094143

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

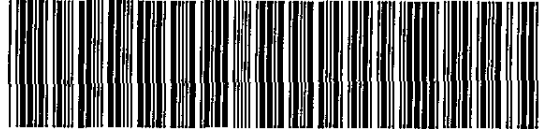
(Business Entity Name)

(Document Number)

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*Resignation*

*of*

*officer*

FILED  
SEP 22 PM 3:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
SEP 22 PM 12:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*DR*  
*9/22/05*



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 610618 6699A

AUTHORIZATION : *Patricia Pujate*

COST LIMIT : \$ 35.00

ORDER DATE : September 22, 2005

ORDER TIME : 10:46 AM

ORDER NO. : 610618-005

CUSTOMER NO: 6699A

CUSTOMER: Ms. Irene Crawford  
Larry J. Behar, P.a.  
Suite 400  
888 S.e. 3rd Avenue  
Ft. Lauderdale, FL 33316-1159

OFFICER DIRECTOR RESIGNATION

NAME: ALVAREZ-SCHWARZ CORP.

XX OFFICER/DIRECTOR RESIGNATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

           CERTIFIED COPY  
XX            PLAIN STAMPED COPY  
           CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina Dunlap

EXAMINER'S INITIALS: \_\_\_\_\_

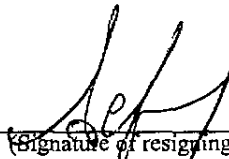
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

**FILED**  
**05 SEP 22 PM 3:49**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

I, ANNE-MARIE, SCHWARZ, hereby resign as secretary  
(Title)

of ALVAREZ-SCHWARZ CORP.  
(Name of Corporation)

P95000094143, a corporation organized under the laws of the State of  
(Document Number, if known)  
FLORIDA

✓   
(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