P96000063939

(Requestor's Name)		
(Address)		
(Address)		
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



100184057861

08/23/10--01032--029 **35.00

2010 AUG 23 AN 8: 58
SECRETARY OF STATE
TALLAHASSEF, FI OPIN

off. Resign.

TB

AUG 26 2010

COVER LETTER

SUBJECT: LEONES INVESTMENTS, INC., A Florida Corporation (Name of Corporation) P96000063939 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RAQUEL LEON PEREIRA, ESQ. (Name of Person) RAQUEL LEON PEREIRA, P.A. (Name of Firm/Company) 3785 NW 82ND AVENUE, SUITE 417 (Address) DORAL, FLORIDA 33166 (City/State and Zip Code) For further information concerning this matter, please call: RAQUEL LEON-PEREIRA, ESQ. (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Street Address: Mailing Address: Amendment Section Amendment Section

Division of Corporations

Post Office Box 6327

Tallahassee, FL 32314

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

BIOAUGES AM 8:50

I, MANUEL R. LEON , hereby resign as VICE PRESIDENT/DIRECT (Title)

of LEONES INVESTMENTS, INC., a Florida Corporation

(Name of Corporation)

P96000063939
(Document Number, if known)

Florida

VICE PRESIDENT/DIRECT

(Title)

FILING FEE IS \$35.00

(Signature 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