

P97000081588

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CENTRAL AGENCY OF FLORIDA INC. (RESIGNATION)

(Name of Corporation)

DOCUMENT NUMBER: P97000081588

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PATRICIO QUEVEDO

(Name of Person)

CENTRAL AGENCY OF FLORIDA INC

(Name of Firm/Company)

50 MENORES AVE # 513

(Address)

CORAL GABLES, FL 33134

(City/State and Zip Code)

For further information concerning this matter, please call:

PATRICIO QUEVEDO

(Name of Person)

at (786) 2776952

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:

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

Mailing Address:

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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED

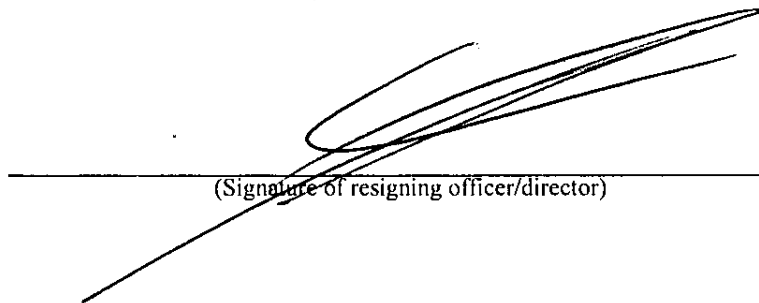
2007 JAN 24 PM 4:50

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

I, PATRICIO QUEVEDO, hereby resign as PRESIDENT
(Title)

of CENTRAL AGENCY OF FLORIDA INC,
(Name of Corporation)

P97000081588, 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