(Re	equestor's Name)	
(Ac	ddress)	
.(Ac	dress)	
(Ći	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nan	ne)
(0		,
(Do	ocument Number)	·
Certified Copies	_ Certificates	of Status
		,
Special Instructions to	Filing Officer:	

Office Use Only



400130075504

05/23/08--01046--006 **35.00

2008 MAY 23 AM 11: 32

officer Resignation
18 6-2-08

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: ALUMA SHIELD INC. (Name of Corporation) DOCUMENT NUMBER: P97000093440
DOCUMENT NUMBER: <u>P970000 93440</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
ALEJANDRO CALLEGARI (Name of Person)
A LUMA SHIELD INC. (Name of Firm/Company)
9450 SW BI AVENUE (Address)
Minmi FL. 33156 (City/State and Zip Code)
For further information concerning this matter, please call: (A/FX)
ALEJANDRO CAIIEGARIat (305) 606-5576 (Name of Person) OR (Area Code & Daytime Telephone Number) REBECCA CALIEGARI (786) 586-3851 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

I, CHRISTOPHER BUTLER, hereby resign as VPT (Title)	_
of ALUMA SHIELD, INC. (Name of Corporation)	,
P9700093440 , a corporation organized under the laws of the State of	
FLORIDA SECRETAR 23	7
	111
(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