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Requester's		O SEP
Address		-6 PM
City/State/Zip	Phone #	S: 34 FLORIDA

Office Use Only

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.	
(Corporation Name)	(Document #)
2	
(Corporation Name)	(Document#)
(Corporation Name)	(Document #)
4(Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait	Photocopy Certificate of Status
NEW FILINGS	AMENDMENTS
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
☐ Annual Report ☐ Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other

Examiner's Initials



Florida Department of State, Jim Smith, Secretary of State

## RESIGNATION OF OFFICER AND/OR DIRECTOR

## AFFIDAVIT

STATE OF FLORIDA :	
COUNTY OFMIAMI-DADE:	
BEFORE ME, the undersigned authority, personally approximately approxima	peared vs to
the best of <u>his</u> knowledge, information and belief, and penalties of perjury:	
1. That ROQUE TORRES has resigned as a Officer, Director  SANTOR DISTRIBUTORS, INC. (Title)	·
(Name of Corporation)	<u>.</u>
2. That the corporation has been notified in writing of the resignation; and	
3. That corporate minutes relating to the resignation are unavailable.  FURTHER AFFIANT SAYETH NOT.	
ROQUE PORRES. AFFIANT  Sworn to and subscribed before me this9th , day ofAugust, 2000.	
My Commission Expires:  OFFICIAL NOTARY PUBLIC  OFFICIAL NOTARY SEAL GRACIELA CORVO  NOTARY PUBLIC STATE OF FLORIDA  NOTARY PUBLIC STATE OF FLORIDA	. After

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 (904) 487-6051

COMMISSION NO. CC591064