P98000095800

(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
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Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
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13 SEP 20 PH 2: 01

SECRETARY OF STATE TALLAWASSEE, FLORIDA

8EP 27 2013 T. CARTER

TRANSMITTAL LETTER

Division of Corporations
SUBJECT: ALAMANDA CORP
(Name of Corporation)
DOCUMENT NUMBER: P98000095800
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
DOMINGO ARRECHEA
(Name of Person)
ALAMANDA CORP
(Name of Firm/Company)
155 NW 20 ST
(Address)
MIAMI, FL 33127
(City/State and Zip Code)
For further information concerning this matter, please call:
LURBIN ARRECHEA at (305)384-8059 (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION SECRETARY OF STATE TALLAHASSEE. FLORIDA FOR A CORPORATION 13 SEP 20 PM 2: 01

, FABIO D ARRECHEA	hereby resign as PRESIDENT
	(Title)
of ALAMANDA CORP	
(Name of Corporation))
P98000095800 , a corpora	tion organized under the laws of the State of
FLORIDA	
Gal.	

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