

P99000015749

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

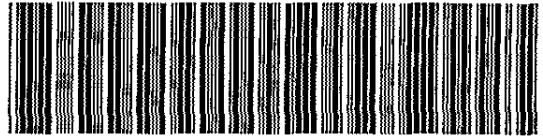
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300025924313

01/08/04--01021--007 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2004 JAN -8 PM 3:47

O/D Resign.

01/10/04

DC

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: VOYAGER EXPORT, INC.

(Name of Corporation)

DOCUMENT NUMBER: P99000015749

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

Please return all correspondence concerning this matter to the following:

MICHAEL SCHIFFRIN

(Name of Person)

MICHAEL SCHIFFRIN & ASSOC., P.A.

(Name of Firm/Company)

9130 S. Dadeland Blvd., Suite 1109

(Address)

Miami, Florida 33156

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Schiffrin

(Name of Person)

at (305) 539-0000

(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

Street Address:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

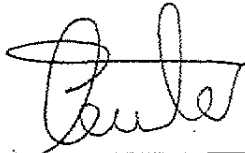
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, SOLANGE NORIEGA, hereby resign as President and Director
(Title)

of VOYAGER EXPORT, INC.
(Name of Corporation)

P99000015749, 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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2004 JAN - 8 PM 3:47