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(Re	equestor's Name)			
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• :				
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SECRETARY OF STATE

officer Resignation

TB 1-20-09

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:_	BENITEZ MOI	BILE SERVICES, IN	1C	
		•	of Corp	oration)
DOCUMEN	T NUMBER:_	P990000052398		
The enclosed	Officer/Directo	r Resignation for a Co	orporati	on and fee are submitted for filing
Please return	all corresponder	nce concerning this m	atter to	the following:
LEONARD	O FALERO			
	(Name	of Person)		<u></u> -
BENITEZ N	OBILE SERV	ICES, INC		
	(Name of F	irm/Company)		_
730 W 44 F				
	(Ad	dress)		
HIALEAH	FLORIDA 330	12		
	(City/State	and Zip Code)	· · · · · · · · · · · · · · · · · · ·	
For further in	formation conce	erning this matter, plea	ase call	:
LEONARD	FALERO	at (305	218-0262 ode & Daytime Telephone Number)
	(Name of Perso	on) (nc	Area Co	ode & Daytime Telephone Number)
Enclosed is a	check for \$35.0	0 made payable to the	Florid	a Department of State.
Street Addre Amendment S Division of Co Clifton Buildi 2661 Executiv Tallahassee, F	Section orporations ng ve Center Circle	Mailing Add Amendment S Division of C Post Office B Tallahassee, I	Section orporat ox 632	7

CR2E044(08/05)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

JUAN R BENITEZ	, hereby resign as OFFICER/DIRECTOR
7	(Title)
of BENITEZ MOBILE SERVICES, INC. (Name of Co	· · · · · · · · · · · · · · · · · · ·
D00000052308	corporation organized under the laws of the State of
<u>FLORIDA</u> .	TALLAHASST TALLAHASST
(Signat	ure 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