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EXAMINER

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Resignation
(Name of Corporation)
DOCUMENT NUMBER: S31768
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Nilo E. Villena Jr.
(Name of Person)
(Name of Firm/Company)
PO Box 652623
(Address)
Miami, FL 33265
(City/State and Zip Code)
For further information concerning this matter, please call:
Nilo E Villena jr. at (305) 8882181 (Name of Person) (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.
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

, hereby resign as President, Secretary (Title)	
(Title)	
nc.	
orporation)	
corporation organized under the laws of the State of	
a Anna a	
sture 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 17 AUG -5 PM 26 06