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	nendment Section vision of Corporations		
SUBJECT	T:_SERVI-DENT INC.		
DODOLO.		(Name of Corpora	ation)
DOCUM	ENT NUMBER: V0998	7	
The enclos	sed Officer/Director Resigna	ation for a Corporation	and fee are submitted for filing
Please retu	urn all correspondence conce	erning this matter to th	e following:
YOLANI	DA CARRENO		
****	(Name of Person)	
YOLANI	DA M CARRENO, INC.		
	(Name of Firm/Comp	pany)	
14750 S	SW 26 STREET SUITE 11	2	
	(Address)	1/2	
MIAMI, I	FL 33185-5935		
	(City/State and Zip C	Code)	
For furthe	er information concerning thi	is matter, please call:	
YOLAND	DA CARRENO	at (305) 554-4032 e & Daytime Telephone Number)
***	(Name of Person)	(Area Code	& Daytime Telephone Number)
Enclosed	is a check for \$35.00 made p	payable to the Florida	Department of State.
Division of Clifton But 2661 Execution	ent Section of Corporations uilding	Mailing Address: Amendment Section Division of Corporation Post Office Box 6327 Tallahassee, FL 32314	

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,RODRIGO E ECHEVERRI	, hereby resign as PRESIDENT	
	(Title)	
of_SERVI-DENT INC.		
(Name	of Corporation)	
(Document Number, if known)	, a corporation organized under the laws of the State of	
FLORIDA	·	
af sail	SECRETARY OF STATE FLORIDE 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