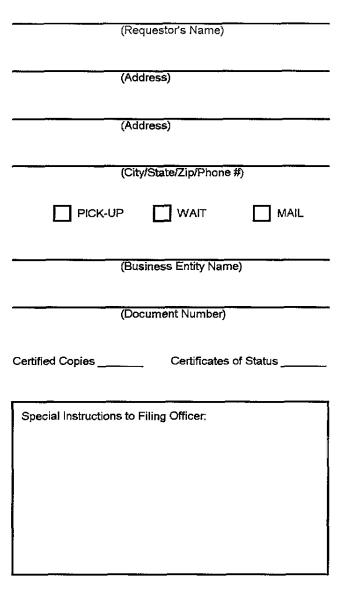
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: SELECT SURDPE, TUC. (Name of Corporation) DOCUMENT NUMBER: POOCOO 10715S
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
LAUREN VAROL (Name of Person)
SELECT EUROPE, INC. (Name of Firm/Company)
610 SYCAMORE ST. STE 225 (Address)
CELEBRATION, FL 34747 (City/State and Zip Code)
For further information concerning this matter, please call:
TONY VAROC at (321) 939-2988 (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
Post Office Box 6327
Tallahassee. FL 32314

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

L	LAUREN	VAROL	, hereby resign as_	DIRECTOR	ile)		•
of	SELECT EL	(Name of Corpora	WC_			,	
	00000 107155 (Document Number, if known	5 ,a corp	oration organized un	der the laws of the	State of		
	FLORIDA	·•					
			2				
			Had	<i>?</i> 	TALLA	2006 H	
		(Signature)	Fresigning officer/direc	tor)	AHASSE	2006 MAR 6	+114
					e, FLORID	AH 10: 25	C
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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