## PD9000053018

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	:y/State/Zip/Phone	#)
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PICK-UP	MAIT WAIT	MAIL
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

OD/Res (a 10/24/09

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Kemsmart Corp.  (Name of Corporation)  DOCUMENT NUMBER: 10900053018
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Roberts J. Abrea (Name of Person)
(Name of Person)
Kemsmart Corp.
(Name of Firm/Company)
123 SE 3rd Avenue Suite 493
(Address)
Miami FL 33131 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Xavier Vilaro at (939 644-2886  (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.

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

TO:

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Roberto J. Abi	eu, hereby resign as V.P.C.F.O
	(Title)
`	of Corporation)
(Document Number, if known)	, a corporation organized under the laws of the State of
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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
TALLAHASSEE, FLORIDA
TALLAHASSEE, FLORIDA