195385

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
) (Business Entity Name)				
(Document Number) Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
OND FEB 16 AM 8: 00 SEGRETARY OF STATE NAME ANASSEE, FLORID				

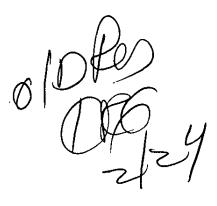


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SECRETARY OF STATE
ALLAHASSEE, FLORIDA





F)

COVER LETTER

Panexus Corporation SUBJECT:_ (Name of Corporation) L95385 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Michael Acra (Name of Person) Panexus Corp (Name of Firm/Company) 9590 NW 25th St (Address) Miami, FL 33172 (City/State and Zip Code) For further information concerning this matter, please call: Michael Acra 305) 599-2867 (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Street Address: Mailing Address: Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Post Office Box 6327 Tallahassee, FL 32314

TO:

Amendment Section **Division of Corporations**

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I.	Sonia Duarte	, hereby resign as	Vice President	
-,		,,	(Title)	
of	Panexus Corporation			
-	(Name of Corporation)			
	L95385	, a corporation organized under the laws of the State of		
	(Document Number, if known)			
	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

10 FEB 12 PH 12: 14
SECRETARY OF STATE
TAILAHASSEE, FLORIDA