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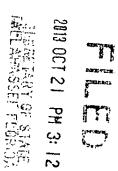
(Requestor's Name)						
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COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	CADMOS USA, CORP.
	(Name of Corporation)
DOC	UMENT NUMBER: P10000019553
The er	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
Flo	rence Spelzhausen
	(Name of Person)
Nat	ional Corporate Research, Ltd. (Name of Firm/Company)
615	5 S Dupont Hwy (Address)
_	
Do	ver, DE 19901
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
Flo	rence Spelzhausen at 866 621-3524
	(Name of Person) (Area Code & Daytime Telephone Number) (
	sed is a check made payable to the Florida Department of State for \$87.50 for an active corporation 5.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
Amen Divisi Cliftor 2661	Mailing Address: dment Section on of Corporations n Building Executive Center Circle passee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	s of section 608.416(2)	or 608.509, Florida	a Statutes, the unders	signed,		
National	Corporate Resear	ch, Ltd.	, hereby resign	ns as		
	Name of Registered Agent					
Registered Agent for	LE MYSTERE LLC					
	Name of Limited	d Liability Company		<u> </u>		_,
M06000	0002427	_				
Document Nur	nber, if known					
A copy of this resignation	n was mailed to the abov	ve listed limited lia	ibility company at its	s last known a	ddress	.
The agency is terminated	and the office discontin	nued on the 31st da	y after the date on w	hich this state	ement	is filed.
	F	Alule				
	Si	ignature of Resigning	Agent			
If signing on behalf of an	entity:					
	Andı	rew Lundgren				
	Турс	d or Printed Name		12	20	
	V.P., National (Corporate Rese	arch, Ltd.	}—``@ ≱≱:3.e	2013 OCT 2	-V-V
		Capacity		설(194) 구소로 (1	CT	eneman.
				SSE	2	70000
				ارد الله روزي	PM	respond
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	FILING FE	EES:	:1:4	(C) (C)		Same?
	\$ 85.00 A \$ 25.00 A	Administratively d withdrawn limited	ility company issolved/ voluntarily liability company	dissolved/	2	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314