

N050000000693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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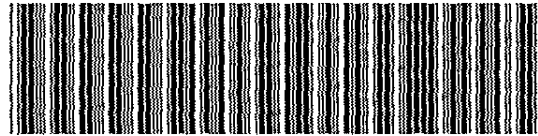
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Roberts SEP 08 2006

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BRUSA - BRAZILIAN ASSOCIATION OF USA INC,
(Name of Corporation)

DOCUMENT NUMBER: 0 N 05000000 693

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARCIA BORTOLLI
(Name of Person)

BRUSA
(Name of Firm/Company)

901 E SAMPLE RD
(Address)

POMPANO BEACH FL 33064
(City/State and Zip Code)

For further information concerning this matter, please call:

WILLINGTON OLFARIA at (954) 691-5101
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.


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

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
06 SEP -8 PM 4:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, WELLINGTON DE FARIA, hereby resign as TREASURER
(Title)
of BRAUSA - BRAZILIAN ASSOCIATION OF USA, CORP.
(Name of Corporation)
NS000000693, 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