N23000004673

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:
Officer / Director Resignation

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TALLAHASSEE, FL

AB

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EMPRENDAMOS INC
(Name of Corporation)

DOCUMENT NUMBER: N23000040 73

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

Please return all correspondence concerning this matter to the following:

STEVIN CAMARGO RIERA
(Name of Person)

(Name of Firm/Company)

1146 NW 7th Ct Apt 803
(Address)

Miami, Florida 33136
(City/State and Zip Code)

For further information concerning this matter, please call:

Stevin Camargo at (786) 6098982
(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
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E044 (05/13)

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

I. Stevin Comargo Riera, hereby resign as Director
(Title)

of EMPRENDAMUS INC.
(Name of Corporation)

N23000004073, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.

(Signature of resigning officer/director)

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TALLAHASSEE, FL

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