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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: PERFECT FOODS CORPORATION (Name of Corporation)  DOCUMENT NUMBER: PO1000069223
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ARNE ROTUE (Name of Person)
(Name of Firm/Company)
4521 PGA BLUD SUITE (Address)
PALM BEH GARAENS FL 33418 (City/State and Zip Code)
For further information concerning this matter, please call:
ARNE ROTNE at (56) 762 4418  (Name of Person) at (56) 762 4418  (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 409 E. Gaines Street Tallahassee, FL 32399

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

CEO, PI	26210en	,T
I, ARNE ROTNE hereby resign as DIRE	ZTUR	
I, ARNE KOTNE , hereby resign as DIRE ANY + AZL TI	l'itle) かない	
of PERFECT FOODS CURP. (Name of Corporation)		_,
Polooo6923, a corporation organized under the laws of the (Document Number, if known)	ne State of	
FLORIDA.		
(Signature of resigning officer/director)	. ZA	
ETT INC FEE IS \$25.00	05 APR 20 AM II SECRETARY OF S LLAHASSEE, FL	
FILING FEE IS \$35.00	SZ Z	

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314