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Certified Copies Certificates of Status		
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officer Resignation

Office Use Only

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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

currence Regular company
SUBJECT: REIMEX CORPORATEON (Name of Corporation)  DOCUMENT NUMBER: POLOGOO 99087
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Person) RICHARD BIRKENWALD, ESQ ATTORNEY AT LAW 17101 NE 19TH AVE. SUITE 203 NO. MIAMI BEACH, FL 33162
(Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
RSCHARD BEAKENWALD at (305) 744 - 3335 (Name of Person) at (305 ) 744 - 3335 (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



## 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