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COVER LETTER

TO: Amendment Section Division of Corporations						
SUBJECT: B. R. BRUTHERS, I'C (Name of Corporation)						
DOCUMENT NUMBER: 0 02000664537						
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
RAUPH A. Emmanuelli (Name of Person)						
N/A						
(Name of Firm/Company)						
P. O. Box 4218 (Address)						
Clennator FC 33755 (City/State and Zip Code)						
For further information concerning this matter, please call:						
Ralph A. Enmanuelli at (727) 639-7962 (Name of Person) at (727) 639-7962 (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

1, RALPH	A. EMMANUE	<u> </u>	, hereby resig	gn as	Vice	Pusi.	dent	
of B.R	. Brothers	エレC. Jame of Corpora	tion)					,
P0200 (Docum	on 064537 ent Number, if known)	, a corpo	oration organize	ed unde	er the law	s of the S	State of	
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	Sal	Y (Signature o	f resigning officer	r/director	,		NACE OF THE PARTY	0;
		FILING I	FEE IS \$35.00)			CARTAPY OF STATE	FILED 7 NOV 21 PM 2

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

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