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COVER LETTER

SUBJECT: KOMS International Corp. (Name of Corporation)
DOCUMENT NUMBER: PO2000 103156
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)
Kons International Corp. (Name of Firm/Company)
100 SE First St. # 38-39 (Address)
Micmi FL 33131 (City/State and Zip Code)
For further information concerning this matter, please call:
CCSC/L. (Name of Person) at (305) 305-1340 (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

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. Ximena	Gaenz	, hereby resign as	VicePreside	ent	
-,			(Title)		
of komo tr	<u>Name of Corpor</u>	corp.			,
	(Name of Corpor	ation)			
(Document Number,		ooration organized und	er the laws of the Stat	te of	
florida	•				
	~ 0				
	(Signature	of resigning officer/director	or)		
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	FILING	FEE IS \$35.00		:0110	**
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Make checks payable to Florida Department of State and mail to:

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