

P03000135041

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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001/003

TO : FRANK AMSALEM

FROM : GILLES GROGUELIN, ARKEO SOLUTION INC

DATE : 5<sup>th</sup> AUGUST 2004-08-05

OBJECT : RESIGNATION ACT

*nb page 3*

Franck,

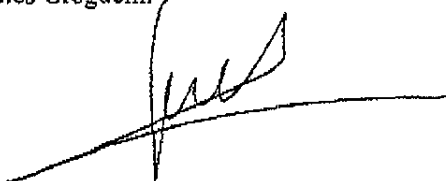
Please find the fulfilled resignation act for me as PRESIDENT, SECRETARY and DIRECTOR of Arkeo Solution INC

Could you please registered it at the Amendment Section of Division of Corporation  
PO BOX 6327 Tallahassee, FLORIDA 32314

Could you send me by email your IBAN for fees transfer.

Best Regards

Gilles Groguelin

A handwritten signature in black ink, appearing to be 'Gilles', written over a horizontal line.

TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: ARKED SOLUTION INC  
(Name of Corporation)

DOCUMENT NUMBER: P03000135041

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

Please return all correspondence concerning this matter to the following:

FRANK AMSALEN  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

777 ARTHUR GODFREY ROAD, SECOND FLOOR  
(Address)

MIAMI BEACH FL 33140  
(City/State and Zip Code)

For further information concerning this matter, please call:

FRANK AMSALEN at (305) 534-8171  
(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  
409 E. Gaines Street  
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

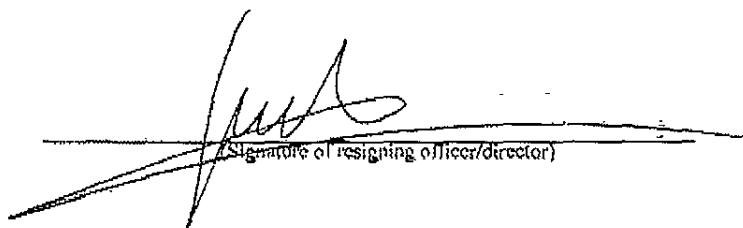
FILED  
04 SEP 29 AM 8:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, GROGUELIN-BESNARD, Dglla, hereby resign as PRESIDENT, SECRETARY,  
(Title) DIRECTOR

of ARKEO SOLUTION INC.  
(Name of Corporation)

PO3000135041, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

**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