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(Re	questor's Name)		
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Certified Copies Certificates of Status			
Special Instructions to	Filing Officer:	1	
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officer Rosign Even Murphy 11/20/07

COVER LETTER

SUBJECT: BRCF INC (Name of Corporation)
DOCUMENT NUMBER: POUDODO 83 607
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
CARMELITA KANHAT (Name of Person)
BRCF IN C (Name of Firm/Company)
5100 BROON WAY (Address)
W. P.B FL 33407 (City/State and Zip Code)
For further information concerning this matter, please call:
CARMOLITA KANHAT at (347) 232-5636 (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
Post Office Box 6327

Tallahassee, FL 32314

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Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Amendment Section Division of Corporations

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1			
I, CARMELITA KANHAE, hereby resign as VICE Presign	dent		
	le)		
of BRCE INC (Name of Corporation)		,	
(Name of Corporation)			
Po 4 00 00 83 607, a corporation organized under the laws of the (Document Number, if known)	State of		
FLORINA			
Com the tanha. (Signature of resigning officer/director)			
(Signature of resigning officer/director)			
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FILING FEE IS \$35.00	OF STATE	ΡH	
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Make checks payable to Florida Department of State and mail to:	DE	Ţ	

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