P0500013579

| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Addiess) | | | | |
| (Address) | | | | |
| | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Dusings Entity Name) | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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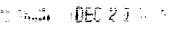
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SECRETARY DE STATE





COVER LETTER

| TO: | Amendment Section Division of Corporations |
|----------------------------------|---|
| SUBJ | JECT:_Barmeco Enterprises Inc. |
| | (Name of Corporation) |
| DOC | UMENT NUMBER: P05000013579 |
| The e | nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. |
| Please | e return all correspondence concerning this matter to the following: |
| ENF | RIQUE A SAROZA |
| • | (Name of Person) |
| Barr | meco Enterprises, Inc. |
| | (Name of Firm/Company) |
| 315- | -86th Street, #3 |
| | (Address) |
| MIA | MI BEACH, FL., 33141 |
| | (City/State and Zip Code) |
| For fu | orther information concerning this matter, please call: |
| ESTI | ELA MENDEZ at (305) 718-3515 (Name of Person) (Area Code & Daytime Telephone Number) |
| | (Name of Person) (Area Code & Daytime Telephone Number) |
| Enclo | sed is a check for \$35.00 made payable to the Florida Department of State. |
| Amen Divisi Clifto 2661 | Mailing Address: dment Section on of Corporations n Building Executive Center Circle passee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314 |

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| I, SACHA TEIXIDOR | , hereby resign as V.P. | | | |
|--|---|--|--------------------|------|
| 7 | | (Title) | | |
| of BARMECO ENTERPRISES | | | | _, |
| (Na | me of Corporation) | | | |
| P05000013579 (Document Number, if known) | , a corporation organized under the laws of | of the State | of | |
| FLORIDA | | | | |
| | (Signature of resigning officer/director) | SECRETARY OF STATE TALLAHASSEE FLORIDA | 05 DEC 14 AN IC 43 | ガーのロ |

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