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COVER LETTER

MACEDO'S BROTHER CORPORATION **SUBJECT:** (Name of Corporation) DOCUMENT NUMBER: P05000046731 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JOSE WILSON MACEDO (Name of Person) MACEDO'S BROTHER CORPORATION (Name of Firm/Company) 9810 BERNWOOD PLACE DR # 108 (Address) FORT MYERS FL33912 (City/State and Zip Code) For further information concerning this matter, please call: JOSE WILSON MACEDO 229.4928 (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: Mailing Address:** Amendment Section Amendment Section

Division of Corporations

Post Office Box 6327

Tallahassee, FL 32314

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, ANDREIA FARIA	, hereby resign as VICE F	RESIDENT
		(Title)
of MACEDO'S BROTHER CORPORA		,
(Name of Corp	oration)	
P05000046731 ,a co	orporation organized under the law	ws of the State of
(Document Number, if known)		
FLORIDA		
(Signature	e of resigning officer/director)	TALLAHASS
FILIN	G FEE IS \$35.00	ILED 18 PM 5: 2 ASSEE, FLORI

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

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