P05000127582

| , (R | equestor's Name) | y | |
|-----------------------------------------|------------------------|--------|--|
| (A | ddress) | | |
| · | ddress) | | |
| (C | ity/State/Zip/Phone #) | | |
| PICK-UP | WAIT | MAIL | |
| (Business Entity Name) | | | |
| | | • | |
| (Document Number) | | | |
| Certified Copies | Certificates of | Status | |
| Special Instructions to Filing Officer: | | | |
| | | | |



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SECRETARY OF STATE

officer Resignation

Office Use Only

TB (0/1)

COVER LETTER

| SUBJECT: JAMR GROUP, INC. | me of Corporation) |
|---------------------------------------------------|------------------------------------------------------------|
| D05000407500 | me of Corporation) |
| DOCUMENT NUMBER: PUSUOU127582 | |
| The enclosed Officer/Director Resignation for a | Corporation and fee are submitted for filing |
| Please return all correspondence concerning this | s matter to the following: |
| JOSE A RÉYGADAS | |
| (Name of Person) | |
| REYGADAS & ASSOCIATES, INC. | |
| (Name of Firm/Company) | |
| 420 LINCOLN ROAD, SUITE 357 | |
| (Address) | |
| MIAMI BEACH, FLORIDA 33139 | |
| (City/State and Zip Code) | · |
| For further information concerning this matter, J | please call: |
| JOSE A REYGADAS | 786 269-0715 |
| (Name of Person) | (786) 269-0715 (Area Code & Daytime Telephone Number) |

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

Amendment Section Division of Corporations

TO:

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

ZOOT JUN-7 AM 10: 06
TALLAHASSEE. FLORIDA

| JOSE A REYGADAS | , hereby resign as MANAGER | |
|------------------------------------------|----------------------------------------------------------|--|
| | (Title) | |
| of JAMR GROUP INC. | | |
| | e of Corporation) | |
| P05000127582 (Document Number, if known) | , a corporation organized under the laws of the State of | |
| FLORIDA | - James | |
| <u> </u> | (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