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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: REALPE IMPORT EXPORT, INC.
(Name of Corporation)

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

SEGUNDO REALPE

(Name of Person)

REALPE IMPORT EXPORT

(Name of Firm/Company)

P.O. BOX 28543

(Address)

JACKSONVILLE, FL. 32226-8543

(City/State and Zip Code)

For further information concerning this matter, please call:

SEGUNDO REALPE at (904) 361-8541
(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:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

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