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Office Use Only



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Resign.

05-10-13

TRANSMITTAL LETTER

SUBJECT: Sir Edward Participation inc (Name of Corporation)
(Name of Corporation)
DOCUMENT NUMBER: P-06 0000 68 024
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Person)
Piao salussala Caporete mengament inc. (Name of Firm/Company)
1410 20th street suite 214
MICMI-13each fl 33139 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at 305 3732017 (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 409 E. Gaines Street Tallahassee, FL 32399

Amendment Section Division of Corporations

TO:

CR2E044 (03/12)

Mailing Address: Amendment Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

i, Monica fira	do	, hereby resign as_	PST	(Title)	
of Sir Educi	d Port	CIPATION ration)	inc.		,
P-06000680 (Document Number, if known)24 ,a cor	poration organized ur	nder the laws of	the State of	
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				13 H	can freque
	(Signature	A Lygdo of resigning officer/direct	A.		Emer- encon
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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