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TALLAHASSEE, FLORIDA

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COVER LETTER

TO:	Amendment Section Division of Corporations
SUB.	JECT: Media Empire Inc. (Name of Corporation)
	CUMENT NUMBER: P0700084521
The e	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Pleas	e return all correspondence concerning this matter to the following:
	Gerald Schiera (Name of Person)
	Medica Empire Inc (Name of Firm/Company)
4	066 SE Forgal St (Address)
Port	Saint Lucie FL 34943 (City/State and Zip Code)
For fi	urther information concerning this matter, please call:
<u></u>	eral Schiera at (772) 879-9227 (Name of Person) at (772) 879-9227 (Area Code & Daytime Telephone Number)
Enclo	osed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divis Clifto 2661	Mailing Address: Amendment Section ion of Corporations on Building Executive Center Circle bassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Gerald Schiera	, hereby resign as Partner	(Title)
of Media Empire Inc. (Name	of Corporation)	······································
P07060044521 (Document Number, if known)	, a corporation organized under the laws of	f the State of
Florida	·	
Jersel _	Signature of resigning officer/director)	FILED 08 JAN-4 PM 2:37 SECRETARY OF STATE TALLAHASSEE, FLORID

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