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(Re	equestor's Name)	
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(Ci	ty/State/Zip/Phone	• #)
PICK-UP	WAIT	MAIL
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(Do	ocument Number)	
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## TRANSMITTAL LETTER

Division of Corporations EDEFYL USA INC. (Name of Corporation) DOCUMENT NUMBER: P09000063498 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: SERGIO BROK (Name of Person) (Name of Firm/Company) 4151 NW 2nd AVE (Address) MIAMI, FL 33127 (City/State and Zip Code) For further information concerning this matter, please call: SERGIO BROK (Name of Person)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section

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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

<sub>I.</sub> SERGIO BROK	, hereby resign as SECRETARY
	(Title)
of LEDEFYL USA INC	•
(Name o	of Corporation)
P0900063498 (Document Number, if known)	, a corporation organized under the laws of the State of
FLORIDA	<u>-</u> ·
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(S	gnature 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

