

P10000005219

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

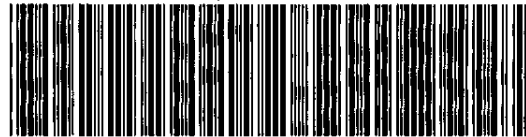
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 JUL - 1 AM 9:49

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off. Resign.

TB

JUL - 6 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BEKKAGENE, INC

(Name of Corporation)

DOCUMENT NUMBER: P10000005219

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

Please return all correspondence concerning this matter to the following:

DARWIN FAVIER

(Name of Person)

BEKKAGENE, INC

(Name of Firm/Company)

600 SW 10 ST 10

(Address)

MIAMI FL 33130

(City/State and Zip Code)

For further information concerning this matter, please call:

DARWIN FAVIER

(Name of Person)

at (305) 7637165

(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

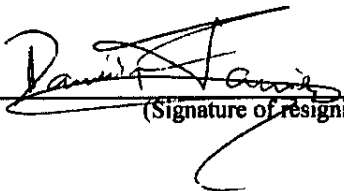
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
2010 JUL -1 AM 9:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, DARWIN FAVIER, hereby resign as Secretary
(Title)

of BEKKAGENE INC
(Name of Corporation)

P10000005219, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA


(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