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TRANSMITTAL LETTER

(Name of Corporation) P 11000053298 **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: (Name of Person) (Name of Firm/Company) (Address) MIAMI FL. 337.65 (City/State and Zip Code) For further information concerning this matter, please call: FELIFE CUTP at (305) ゴタロ 823 ロ (Area Code & Daytime Telephone Number) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Mailing Address: **Street Address:** Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, FELIPE CUZA	, hereby resign as	3/11/16 (Title)
V1	E MARKETING	NC, ,
2110000052098	, a corporation organized und	ler the laws of the State of
FLORIDA	·	,
·		•
	Il Ro	
	(Signature of resigning officer/director	SECRETALLAH
· ·		17 ASSI
	FILING FEE IS \$35.00	AM 9:5

Make checks payable to Florida Department of State and mail to:

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