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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:							
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)						
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: JBS United Inc (Name of Corporation) DOCUMENT NUMBER: PI ODDO 66029
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filin
Please return all correspondence concerning this matter to the following:
JOEL GRUION (Name of Person)
JBS United Inc (Name of Firm/Company) 4969 AyrShire Dr (Address)
(Address) Spring Hill FL 34609 (City/State and Zip Code) For further information concerning this matter, please call:
JOEL GRUILON at (352) 263-4456 (Name of Person) (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

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Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Jose A. S	bantana	_, hereby resign as_	Presiden-	(Title)
ofJBS_	United Inc (Name of Corporate	ion)		,
DI OSSOLOLO (Document Number,	<u>\$\text{D29}</u> , a corposif known)	oration organized und	der the laws of t	the State of
Florida	·		1	en-
	bul			TI SEP 29
	(Signature of	resigning officer/direct	or)	AMII: 56

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