(Requestor's Name)	
(Address)	
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SECRETARY OF STATEMENT OF STATE

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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: BROTHER'S REYES INC		
(Name of Corporation)		
DOCUMENT NUMBER: P11000068085		
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing		
Please return all correspondence concerning this matter to the following:		
ALBA E VIVAR		
(Name of Person)		
MIAMI DISPATCH & CARRIER SERVICES		
(Name of Firm/Company)		
8040 NW 95 TH ST SUITE#106		
(Address)		
HIALEAH GARDENS, FL 33016		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
ALBA E VIVAR at (305) 822-0255 (Name of Person) (Area Code & Daytime Telephone Number)		
(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 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314		

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

L VLADIMIR REYES	, hereby resign as PRESIDENT
-7	(Title)
of BROTHER'S REYES INC	
	e of Corporation)
P11000068085 (Document Number, if known)	, a corporation organized under the laws of the State of
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