

P98000011279

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

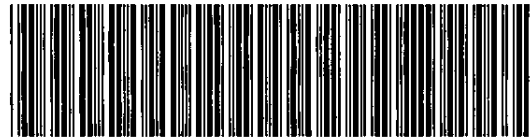
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700264158217

09/15/14--01020--022 **35.00

FILED
SEP 15 2014
14 SEP 15 PM 3:16

DD/RES
@ 9.22.14

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BABY BEEF USA CORP.
(Name of Corporation)

DOCUMENT NUMBER: P98000011279

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

Please return all correspondence concerning this matter to the following:

LUIZ C. SILVA
(Name of Person)

BABY BEEF USA CORP.
(Name of Firm/Company)

6939 NW 82 AVE
(Address)

MIAMI, FL 33166
(City/State and Zip Code)

For further information concerning this matter, please call:

LUIZ SILVA at (305) 477-2700
(Name of Person) (Area Code & Daytime Telephone Number)

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

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

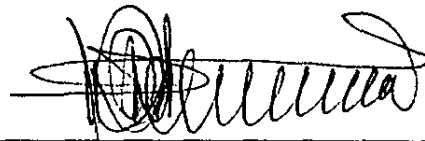
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, ALBERTO DECAT, hereby resign as PRESIDENT
(Title)

of BABY BEEF USA CORP
(Name of Corporation)

P98000011279, 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

FILED
STATE DEPT. OF STATE
DIVISION OF CORPORATIONS
14 SEP 15 PM 3:15