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## **COVER LETTER**

TO: Amendment Section Division of Corporations							
SUBJECT: WILSON'S N.C. FURNKURE, INC. (Name of Corporation)							
DOCUMENT NUMBER: K 7307/							
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
DONNIE WILSON (Name of Person)  WILSON  (Name of Person)							
(Name of Person)  U L U L O U							
(Name of Firm/Company)  9560-11 LEM TURNER ROAD  (Address)  TACKSÖNVILLE, FL 3220P							
(Address)  N. C. Hurniture							
TACKSONVILLE, FL 3220P (City/State and Zip Code)							
For further information concerning this matter, please call:							
WILLIAM HILLEGASS at (904) 346 0713 (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

I, _	LYNNE S. W	ILSON	, hereby resign as_	V,S,D	······································
of_	Kirby-Wi	Name of Corpora	$\leq \mathcal{N} \cdot \mathcal{C}$	Furn: tur	,
	(Document Number, if known)	, a corpo	oration organized un	der the laws of the St	tate of
	FLORIDA	·			
	· 	Signature of	Sulsing officer/direct	or)	OF JUN-9 MIN OF STATES

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