N11000011679

(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:

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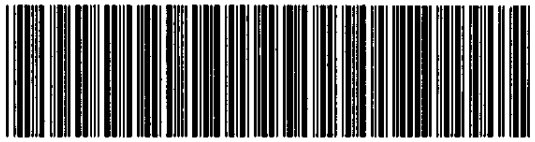

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TALLAHASSEE, FLORIDA

DEC 26 2013

S. PRATHER

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Remarkable Dreams Corp.
(Name of Corporation)

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:

Sandra Coiffman
(Name of Person)

Remarkable Dreams Corp.
(Name of Firm/Company)

20100 NE 20 Crt.
(Address)

Miami, FL 33179
(City/State and Zip Code)

For further information concerning this matter, please call:

Myriam Sutton at (305) 216-9079
(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, Sandra Coffman, hereby resign as President
(Title)

of Remarkable Dreams Corp.
(Name of Corporation)

N11000011679, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Sandra
(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