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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Kapitol Managment, Inc. (Name of Corporation)
DOCUMENT NUMBER: <u>F0800000673</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Pra Mario Vargos (Name of Person)
Kapital Management, Inc. (Name of Firm/Company)
8001 N Dale Mabry. Highway Ste 701.
Tampa FZ 33614 (City/State and Zip Code)
For further information concerning this matter, please call:
Ana Maria Vargos at (813) 410-6871 (Name of Person) at (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 409 E. Gaines Street Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Ika D. Josta, hereby resign as Manage	刀・ itle)		
of Kapital Management, Inc (Name of Corporation) The			. >
(Document Number, if known) FLOR IDA .	e State of	f	
Olke U. Austr (Signature of resigning officer/director)	SECRETARY OF STATE	13 FEB -8 AM 9: 13	

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