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(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	·
(Cit	ty/State/Zip/Phone	:#)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Name of Corporation)
DOCUMENT NUMBER: F1700000092
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Victoria Jacobs (Name of Person)
(Name of Firm/Company)
97 Joseph Drive (Address)
Guilford, CT 06437 (City/State and Zip Code)
For further information concerning this matter, please call:
Tuck Dill at (860) 452-4303 x131 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Victoria	Jacobs, hereby resign as COO (Title)
of BUIL	(Name of Corporation),
(Document Number, ii know	, a corporation organized under the laws of the State of
Delaware	·
	(Signature of resigning officer/director) (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