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(Re	equestor's Name)		
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TALLAHASSEE, FLORIDA
19 OCT 13 PH 3: 51

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COVER LETTER

SUBJECT: MONACO INTE	RIORS GRUOP, INC. (Name of Corporation)
DOCUMENT NUMBER:	• •
The enclosed Officer/Director	Resignation for a Corporation and fee are submitted for filing
Please return all correspondence	e concerning this matter to the following:
BARBARA GORDON	
(Name of	Person)
(Name of Fire	m/Company)
150 S.E. 12TH COURT	
(Addi	ress)
POMPANO BEACH, FLOR	RIDA 33060
(City/State ar	id Zip Code)
For further information concern	ning this matter, please call:
BARBARA GORDON	at (954) 913. HHD H
(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

4.4

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

L BARBARA GORDON	, hereby resign as	Director	VP	
7		Т)	itle)	
of MONACO INTERIORS, IN	C.			
	ame of Corporation)			
P00000083881	, a corporation organized under	_, a corporation organized under the laws of the State of		
(Document Number, if known)				
FLORIDA	_			

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

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