P01000090220

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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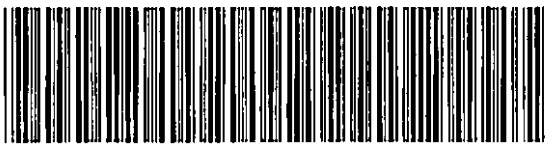

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TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SLB VII INC
(Name of Corporation)

DOCUMENT NUMBER: P01000000220

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PETER KNESKI, ESQ.
(Name of Person)

PETER KNESKI P.A.
(Name of Firm/Company)

333 N.W. 70TH AVE., SUITE 110
(Address)

PLANTATION, FL 33317
(City/State and Zip Code)

For further information concerning this matter, please call:

PETER KNESKI, ESQ. at (954) 583-8765
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for $87.50 for an active corporation or $35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

I, JULIA K. DOURVETAKIS, hereby resign as PRESIDENT
(Title)

of SLB VII INC.
(Name of Corporation)

P01000000220
(Document Number, if known), a corporation organized under the laws of the State of

FLORIDA.

Julia K Dourvetakis
(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE, FL

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