PD3000035859

(R	equestor's Name)	
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(C	ity/State/Zip/Phone	#)
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TRANSMITTAL LETTER

Division of Corporations SUBJECT: ARQUIPROJECT, INC. (Name of Corporation) PO3000035859 **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: JOHNNY HARIRNGTON C/O JOSE DE AGUIAR (Name of Person) ARQUIPROJECT, INC. (Name of Firm/Company) 2750 MYSTIC LAKE DR # 100 (Address) OVIEDO, FL 32765 (City/State and Zip Code) For further information concerning this matter, please call: FRANCISCO BARRANCO (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399 Mailing Address: Amendment Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

- TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

8 . Es &

I, GRISELDA WHITE	, hereby resign as PRESIDENT		
	, neroby resign as	(Title)	
of ARQUIPROJECT, INC.			
fr	Name of Corporation)		
PO 3000035859 (Document Number, if known)	, a corporation organized under the laws of the State of		
FLORIDA			
	(Signature of resigning officer/director) FILING FEE IS \$35.00	OL JUNIT PH 2: 35 TALLAHASSEE, FLORIDA	

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314