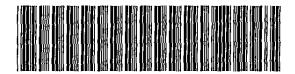
P03000038218

(Requestor's Name)
(Address)
(Address)
(all soo)
101 101 101 1 101 1 101 1 101 1 101 1 101 1 101 1 101 1 101 1 101 1 101
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(
(Decument Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



500050000005

3 4 04/11/05-01008--010 **35.00°

FILED

05 APR 11 PH 12: 03

SECRETARIST OF STATE AREA SEED OF FLORIDA



TOWN DRIKE

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: HOUSE Menders Inc. (Name of Corporation) DOCUMENT NUMBER: PO300038218
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
David Jobbill
(Name of Person)
(Name of Firm/Company)
377 SW 35 Avenue
Deerfield Beach, 12 33442 (City/State and Zip Code)
For further information concerning this matter, please call: David Jobbitt at (954), 868.7923 (Name of Person) (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, SALVATOR PLAUATE, hereby resign as DIRECTOR.
(Title)
of House Manders Incorporated (Name of Corporation)
Po 3000 382/8, a corporation organized under the laws of the State of (Document Number, if known)
FloriDa

(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 5 APR II PHIZ: 03