070146

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	- #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer.		

Office Use Only



900041487649

10/07/04 --01004---001 **35.00

TO: Amendment Section Division of Corporations SUBJECT: Extreme Carpet Installation Inc. Name of Corporation) DOCUMENT NUMBER: P0300070146 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Person) Also mail b: (Name of Firm/Company) INC. (Name of Firm/Company) AND S.W. 143 AV. (Name of Firm/Company) AND N.W. 38 H. Struct (Address) Oakland Park Jul. 33309 (City/State and Zip/Code) For further information concerning this matter, please call: 954 718-2211

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

1. Victoria De ARMAS	, hereby resign as \vert \text{VCE President}
of Extreme Carpet	Installation, Inc.
P03000070146 , a corpo (Document Number, if known)	oration organized under the laws of the State of
FloriDA.	entre de la companya
Victoria (Signatur	de Amas re 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