

P03000135926

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

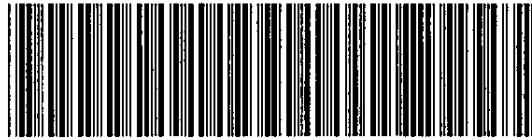
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400096215624

04/13/07--01026--010 **35.00

FILED
07 APR 13 PM 12:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OLD

Resign.

04/19/07

Dr

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: OLIVEIRA FLOOR COVERING INC
(Name of Corporation)

DOCUMENT NUMBER: P03000135926

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARIA STOPA

(Name of Person)

OLIVEIRA FLOOR COVERING INC

(Name of Firm/Company)

9814 BERNWOOD PLACE DR., #304

(Address)

FT. MYERS FL 33966 US

(City/State and Zip Code)

For further information concerning this matter, please call:

MARIA STOPA

(Name of Person)

at (239) 222-4272

(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

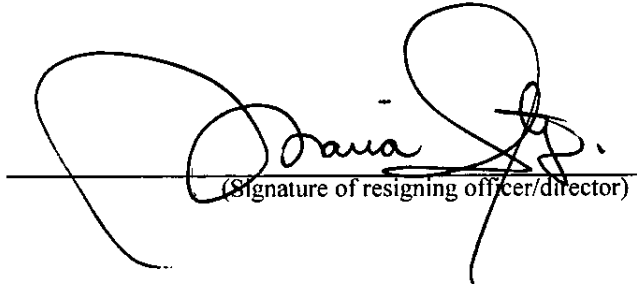
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, MARIA STOPA, hereby resign as CEO
(Title)

of OLIVEIRA FLOOR COVERING, INC.
(Name of Corporation)

P03000135926, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director) 04/10/2007

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

FILED
07 APR 13 PM 12:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA