

P040000041490

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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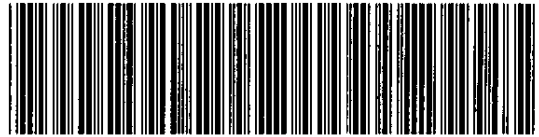
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** 3 STARZ STUCCO, INC  
Name of Corporation

**DOCUMENT NUMBER:** P04000041490

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

GALINA V. GAYDARZHI  
Name of Contact Person

N/A  
Firm/Company

11135 PEERLESS LANE  
Address

JACKSONVILLE, FLORIDA 32246  
City/State and Zip Code

jemchuzhinka@live.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GALINA V. GAYDARHI at ( 904 ) 710-2589  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

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


**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, ALEKSANDR SCHUR, hereby resign as VICE PRESIDENT  
(Title)

of 3 STARZ STUCCO, INC.  
(Name of Corporation)

P04000041490, a corporation organized under the laws of the State of  
(Document Number, if known)  
FLORIDA.

  
(Signature of resigning officer/director)

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TALLAHASSEE, FLORIDA

**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