P04000101951

(Requestor's Name)	
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(Address)	
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(Business Entity Name)	
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TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations
SUBJ	JECT: CLEARVIEW ARCHITECTURAL, INC.
	(Name of Corporation)
DOC	UMENT NUMBER: P04000101951
	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Pleas	e return all correspondence concerning this matter to the following:
CAE	ESAR GUZMAN
	(Name of Person)
CLE	EARVIEW ARCHITECTURAL, INC.
	(Name of Firm/Company)
650	8 MOONSHELL COURT
	(Address)
ORI	LANDO, FL 32819-7560
	(City/State and Zip Code)
For fi	urther information concerning this matter, please call:
CAE	SAR GUZMAN at (631) 433-4312 (Name of Person) (Area Code & Daytime Telephone Number
	(Name of Person) (Area Code & Daytime Telephone Number
Enclo	osed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divis P.O.	ing Address: Independent Section Identify Section Identif

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

L CONCETTA GUZMAN	, hereby resign as SECRETARY	
	(Title)	
of_CLEARVIEW ARCHITE	CTURAL INC. (Name of Corporation)	
P04000101951 (Document Number, if known)	, a corporation organized under the laws of the State of	
FLORIDA		
Con	OS FEB 10 PM 1:42 Signature of resigning officer/director) 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