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TRANSMITTAL LETTER

Division of Corporations
SUBJECT: X cape Solution S, Inc. (Name of Corporation)
DOCUMENT NUMBER: P 0 4 000 11 6 3 10
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 Ellis
(Name of Person)
(Name of Firm/Company)
•
16116 N Florida Ave
(Address)
LUTZ, FL 33549
(City/State and Zip Code)
For further information concerning this matter, please call:
Name of Person) at (727) 236-3678 (Area Code & Daytime Telephone Number)
(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:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

TO: Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

A ...

1, Leslie Ellis	hereby resign as	Vice President 10.	Years.
of Xcape Solution	of Corporation)	,	 -
PO 4-000/163/0 (Document Number, if known)		er the laws of the State of	
Florida	.		981 vil
- Lest	Signature of resigning officer/director	<u>r) </u>	7.55
1	FILING FEE IS \$35.00	05 JUN-1 / SECRETARY O TALLAHASSEE	7=
Make checks payable	to Florida Department of Sta	ASSEE, FLORIDA	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314