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| PICK-UP | WAIT | MAIL |
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COVER LETTER

SUBJECT: Graham Classic Kitchens Inc.

POHODO 144103

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

Please return all correspondence concerning this matter to the following:

Cherie Graham
(Name of Person)

Graham Classic Kitchens
(Name of Firm/Company)

15843 SE 58 Pl
(Address)

Ockla waha Fl 32179
(City/State and Zip Code)

For further information concerning this matter, please call:

Gary (ombs)

at (352) 653-9605
(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

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



| I. GARRY Combs | , hereby resign as Directon (Title) |
|--|---|
| OF GRAHAM CLASSIC | Kitchen, INC |
| PO 4000144103 (Document Number, Il known) | • |
| Florida | ************************************** |
| | |
| 70 | (Signapore of Jesigning 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 Tailahassoo, Florida 32314