

PO5000058513

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

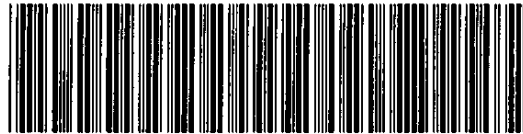
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500113388325

12/31/07--01030--016 **70.00

FILED

07 DEC 31 PM 12:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Officer Resign
Cin Murphy
1/3/08

COVER LETTER

6

TO: Amendment Section
Division of Corporations

SUBJECT: Renovation Solutions, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P05000058513

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

Please return all correspondence concerning this matter to the following:

Cliff King
(Name of Person)

Renovation Solutions, Inc.
(Name of Firm/Company)

1500 W. Cypress Creek Rd Suite 303
(Address)

Fort Lauderdale, FL 33309
(City/State and Zip Code)

For further information concerning this matter, please call:

Jaime A. Stricklin, Esq. at (954) 229-2468
(Name of Person) (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, Connie King, hereby resign as Director/President
(Title)

of Renovation Solutions, Inc.
(Name of Corporation)

P05000058513, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Connie King
(Signature of resigning officer/director)

FILED
07 DEC 31 PM 12:53
SECRETARY OF STATE
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