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SEGRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

	Amendment Section Division of Corporations
SUBJE	CCT: LCID, INC. (Name of Corporation)
DOCU	MENT NUMBER: P05000 117 429
The end	closed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please	return all correspondence concerning this matter to the following:
	DAVID W. BEVINS (Name of Person)
	LCID INC. (Name of Firm/Company)
	708 Braemere Drive (Address)
	SpringHill FL 34609 (City/State and Zip Code)
For fur	ther information concerning this matter, please call:
Da	vid Bevins at (352) 200-9071 (Name of Person) (Area Code & Daytime Telephone Number) 352 683 - 1804
	ed is a check for \$35.00 made payable to the Florida Department of State.
Amend Divisio Clifton 2661 E	Address: Iment Section In of Corporations Building Secutive Center Circle Insert Et 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

الإنجاز ويسا

I, DAVID W. Bevins , hereby resign as President Director
of LCID, INC. (Name of Corporation)
Po500017429, a corporation organized under the laws of the State of (Document Number, if known)
FLORida.
(Signature of resigning officer/director)
FILED SECRETARY OF STALLAHASSEE, FLE
Make checks payable to Florida Department of State and mail to:

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