

PD0000014438

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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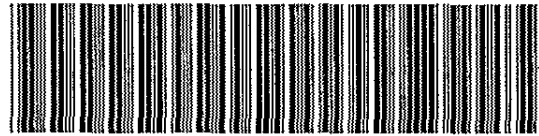
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALL IN 1 HOME IMPROVEMENT, INC.
(Name of Corporation)

DOCUMENT NUMBER: PO6000014438

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CHESTER BALTUSKOUIS
(Name of Person)

ALL IN 1 HOME IMPROVEMENT, INC.
(Name of Firm/Company)

c/o 7101 Venetian Way
(Address)

West Palm Beach, FL 33406
(City/State and Zip Code)

For further information concerning this matter, please call:

STEPHANIE S. PARTEE at (561) 965-7788
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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 32301

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RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION

Pursuant to the provisions of Sections 607.0502(2), 617.0502(2), 607.1509
or 617.1509, Florida Statutes, the undersigned STEPHANIE S. PARTEE
(Name of Registered Agent)

hereby resigns as Registered Agent for ALL IN 1 HOME IMPROVEMENT INC.
(Name of Corporation)

PO6000014438
Document Number, if known

A copy of this resignation was mailed to the above listed corporation at
its last known address.

The agency is terminated and the office discontinued on the 31st day
after the date on which this statement is filed.

Stephanie Partee
(Signature of Resigning Agent)

If signing on behalf of an entity:

STEPHANIE PARTEE
(Typed or Printed Name)

(Capacity)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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Fee for filing this document:

\$87.50 - Active corporation
\$35.00 - Administratively dissolved/voluntarily
dissolved/withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314