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COVER LETTER

Division of Corporations
SUBJECT: Calvinelle Cave Concept inc (Name of Corporation) DOCUMENT NUMBER: 20600069421
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
GAYM DUNN (Name of Person)
Calvinelle Cal Coneptine (Name of Firm/Company)
191 6151 MIRAMAN PAKNY (Address) MIRAMAN PL 33023
(City/State and Zip Code)
For further information concerning this matter, please call:
Gaym D Dunn at (305) 308 27 28 (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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Gace C Hall-Do	aniel, hereby resign as Southern Title
of Calvinelle Care	Concept Inc
PARADOLOUIDI	_, a corporation organized under the laws of the State of
Flonda	_•

(Signature of resigning 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
Tallahassee, Florida 32314