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COVER LETTER

TO:	Amendment Section Division of Corporations
SUB	JECT: CITIPRINT, CORP. (Name of Corporation)
DOC	
	OWILLY INCOME.
The e	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Pleas	e return all correspondence concerning this matter to the following:
MAI	RCELO CABRIER (Name of Person)
	(Traine of 1 erach)
-	(Name of Firm/Company)
786	9 NW 52ND ST.
780	(Address)
MIA	MI, FL 33166
	(City/State and Zip Code)
For f	further information concerning this matter, please call:
	2051 O CARRIER 700 005 1040
MAF	RCELO CABRIER at (786) 285-1249 (Area Code & Daytime Telephone Number)
	(Maine of Terson) (Mea code a Baytine Telephone Maineer)
Encl	osed is a check for \$35.00 made payable to the Florida Department of State.
Ame Divis Clifte 2661	mdment Section sion of Corporations on Building Executive Center Circle whassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



, hereby resign as VPTD and/or T
(Title)
f Corporation)
, a corporation organized under the laws of the State of
gnature 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