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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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8/2/ Ri Resign

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7. Roberts DF

COVER LETTER

Division of Corporations
SUBJECT: MJ Windux and look CoRP, (Name of Corporation) DOCUMENT NUMBER: 10600091644
DOCUMENT NUMBER: 106 0 000 91 644
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
(Name of Person)
(Name of Firm/Company)
(Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
Bru Jood at (954) U3-2787 (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

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	Bentley 160D, hereby resign as Mesident (Title)	
of_	MJ Window and book Coll. (Name of Corporation)	
	PO6000 S/644, a corporation organized under the laws of the State of (Document Number, if known)	
	PLOPISON	
		EN EO

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