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SECRETARY OF STATE
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off. Resign.

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: X tressions Design & Rinting Cost.

(Name of Corporation)

DOCUMENT NUMBER: P 06000106014

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Clizabeth D Coleandro
(Name of Person)

Xtressions Design & Rinting Co

4623 Sw 127 H Mianu

Wiaui Fl 33175 (City/State and Zip Code)

For further information concerning this matter, please call:

Wizabeth Coleandre (305) 994-3073
(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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, Clizabeth D Ca	hereby resign as_	Vice President LUP)
of Xprossions	Design & Rinti ame of Corporation)	ug Coop.
POUDO 101014 (Document Number, if known)	, a corporation organized un	der the laws of the State of
_ Florida		TALCARIAN TALCARIAN
		RETARY P
	(Signature of resigning officer/dyfec	P 2: 24 E. FLORIE Lor.

## **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