## P00000120032

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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08/18/08--01066--012 \*\*35.00

DIVISION OF CORPORATIONS

DD/Res (10/8/20/08

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: MS Painting Services, Inc	
	(Name of Corporation)
DOCUMENT NUMBER: P0600012	6632
The enclosed Officer/Director Resignation	for a Corporation and fee are submitted for filing
Please return all correspondence concerning	ng this matter to the following:
Manuel J. Borge	
(Name of Person)	<del></del>
MS Painting services, Inc.	
(Name of Firm/Company	)
6519 Whispering Wind Way	
(Address)	<del></del>
Delray Beach, FI 33484.	
(City/State and Zip Code	)
For further information concerning this ma	atter, please call:
Manuel J. Borge	at ( 561 ) 504-8675  (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made paya	ble to the Florida Department of State.
Amendment Section Ame Division of Corporations Divi- Clifton Building Post	ling Address: Indiment Section Sion of Corporations Office Box 6327 Shassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Manuel J. Borge	, hereby resign as VP	
,	(Title)	
of MS Painting Services, Inc.		
	of Corporation)	
P06000126632	, a corporation organized under the laws of the State of	
(Document Number, if known)		
Florida		

(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