P06000135724

(Re	equestor's Name)		
(Ac	ddress)		
(Ac	ddress)		
(Ĉi	ty/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
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01) Resign. 03/26/08

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: L 9 N K, + e Len Cabinets Incomment Number: PO6000135724
DOCUMENT NUMBER: P06000135724
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) Ly N Kitchan Ca Binets (Name of Firm/Company)
JODSW 5/st Ave (Address)
<u>∧7, a</u> , <i>⊱</i> (. 3 3 / 3 4 (City/State and Zip Code)
For further information concerning this matter, please call:
Tose Novo at (786) 7/8-2840 (Name of Person) (Area Code & Daytime Telephone Number)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Juse Novo hereby resign as 1/c	e-President (Title)
of L & N K, te Len Cab, nets	INC.
Polo oo 135724 corporation organized under the l	aws of the State of
·	08 HAR 24 SECRETAF
	SEE F. OF
(Signature of resigning officer/director)	2: 01 STATE FI ORIF

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 Taltahassee, Florida 32314