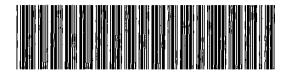
107000/60/6

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





800098180248

07/10/07--01019--009 **35.00





4 - 4.

corporation document number is P07000016016 corporation name Gables Fabrics Inc.

My mailing addres is: Leira Valdivia 9890 Hammocks Blvd. #103 miami,fl.33196

I have filled out the resignation form found in the corporate kit please make the change accordingly. Thankyou in advance if you have any questions please contact me at 786-286-8042.

07 JUN 25 AM 8: 00



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 26, 2007

LEIRA VALDIVIA 9890 HAMMOCKS BLVD., #103 MIAMI, FL 33196

SUBJECT: GABLES FABRICS, INC. Ref. Number: P07000016016

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

The fee to resign as officer/director for a corporation is \$35 per person resigning.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Letter Number: 107A00041774

Karen Gibson Document Specialist Supervisor

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

OFFICER / DIRECTOR RESIGNATION

1. Leira Va	Idivia	hereby		
1, Leira Valdivia hereby resign as (Title) V. President of Gables Fabreics Two (Name of Corp.) a corporation organized under the laws of the State of Florida and affirm that the corporation has been notified in writing of the resignation.				
Dated at Miami June, 200	7 Florida	, this day of		

Signature of resigning officer/director)