

PO7000017976

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

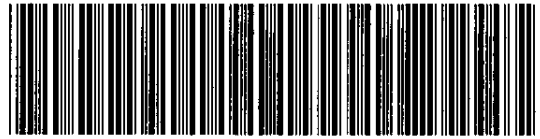
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600166966886

02/02/10--01005--025 \*\*70.00

FILED  
2010 FEB -2 AM 9:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

off. Resign.

TB

FEB - 3 2010

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DECOPLAGE REALTY INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P070000/7976

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

Please return all correspondence concerning this matter to the following:

BRIAN WILSON  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

100 LINCOLN RD #117  
(Address)

MIAMI BEACH FL 33139  
(City/State and Zip Code)

For further information concerning this matter, please call:

BRIAN WILSON at (786) 271 5786  
(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**

**FILED**  
2010 FEB -2 AM 9:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, BRION WILSON, hereby resign as DIRECTOR / PRES.  
(Title)

of DECOPLAGE REALTY, INC.  
(Name of Corporation)

987000017976, 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