2070000 943 25

| (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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| |

Office Use Only



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Mesign

TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations |
|--|
| SUBJECT: Exceptional Properties Inc. (Name of Corporation) DOCUMENT NUMBER: P0700094325 |
| |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing |
| Please return all correspondence concerning this matter to the following: |
| ELIZABETH HOVERDON |
| (Name of Firm/Company) |
| (Name of Firm/Company) |
| 7801 North Federal Hwy #20-102 |
| Boca Raton FL 33487 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Sean Hovendon at (850) 226-1080 (Area Code & Daytime Telephone Number) |
| Enclosed is a check for \$35.00 made payable to the Florida Department of State. |

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| I. E (12Aboth C. Hovenden), hereby resign as Project |
|---|
| (Title) |
| of Exceptional Properties Inc. |
| (Name of Corporation) |
| Pd7000094325 a corporation organized under the laws of the State of (Document Number, if known) |
| FLorida |
| |

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 では、上西