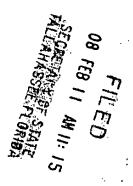
P07000112860

| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------|
| (Ac | ldress) | |
| (Ac | idress) | |
| (Cid | ty/State/Zip/Phone | #) |
| PICK-UP | ☐ WAIT | MAIL MAIL |
| (Bu | ısiness Entity Nam | ne) |
| (Do | ocument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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02/3/08

COVER LETTER

| Division of Corporations |
|--|
| SUBJECT: Liberty Home Solutions, Inc. (Name of Corporation) |
| DOCUMENT NUMBER: P07000112860 |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing |
| Please return all correspondence concerning this matter to the following: |
| Marcus Kiesewetter (Name of Person) |
| Liberty Home Solutions Inc (Name of Firm/Company) |
| 5611 South Lagoon Drive (Address) |
| Panama City Beach Florida 32408 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Marcus Kiesewetter at (850) 624-7649 (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

TO: Amendment Section

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| ı, <u>Μ</u> | larcus | Kies | ewetter. | , hereby resign a | is Secr | etary/ | T <u>reas</u> ure |
|-------------|------------------------|---------------------------|--|-----------------------|---------------|-----------------|-------------------|
| of | Li | berty | Home Name of Corporation | Solution) | ns = | Ine. | |
| | P07000 Document Num | 112860 hber, if known) | , a corpor | ration organized | under the lav | ws of the State | of |
| | Flori | da | ······································ | | | | |
| | | | | | | r | |
| | _ | Ma | (Signature of a | resigning officer/dir | ector) | | 80 |
| | | | | | | HASSE A | F 1837 |
| | | | | | | GF STA | ₹ |

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314