P08000003702

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT	MAIL			
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE
AHASSEF, FLORID.

Off Resign

COVER LETTER

TO:	Amendment Section
	Division of Corporations

SUBJECT: DE LA RIVA KITCHEN CABINETS, INC.
(Name of Corporation)
DOCUMENT NUMBER: P08000003702
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for fill
Please return all correspondence concerning this matter to the following:
Bladimir Noa Gonzalez
(Name of Person)
De la Riva Kitchen Cabinets, Inc.
(Name of Firm/Company)
9473 Hayes Street
. (Address)
Springhill, FL 34608
(City/State and Zip Code)
For further information concerning this matter, please call:
Bladimir Noa Gonzalez at (786) 262-3921 (Name of Person) (Area Code & Daytime Telephone Number
(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

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OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Ι, _	Tomas Vargas	, hereby resign as	Director/President
	,		(Title)
ol_		Kitchen Cabinets, Inc.	
		Name of Corporation)	
	P08000003702	, a corporation organized un	der the laws of the State of
	(Document Number, if known)		
	Florida		
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	,		LAFE PR
		500 0	08 APR 28 SECRETAR ALLAHASS
	***************************************	(Signature of resigning officer/direct	(or)
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		•	09 ORID

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