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officer Presignation
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## **COVER LETTER**

Division of Corporations					
SUBJECT: Latin Flowers Art & Decor Inc. (Name of Corporation)					
DOCUMENT NUMBER: <u>P0800037550</u>					
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Libia. C. Mahe (Name of Person)					
Co-cuper / Director (Name of Firm/Company)					
3259 Carlton Armo Dr. (Address)					
Tampa Fl. 33614 (City/State and Zip Code)					
For further information concerning this matter, please call:					
Genevière Perez at (813) 2153519 (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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TO:

Amendment Section

•	OFFICER / DIREC FOR A CO	CTOR RESIGNA PRPORATION	TION  TALLAHASS	RY OF STATE ORION
I, Libia. C	Mapré	, hereby resign as	(Title)	/ Director
of Jatin Fle	Swers Art A (Name of Corpora	Decor inc		······································
(Document Number	er, if known) . a corpo	oration organized und	er the laws of the St	ate of
P0800003	7550			

(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