## PCCCC 070 366

(Requestor's Name)				
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(C	ity/State/Zip/Phone #	(1)		
PICK-UP	☐ WAIT	MAIL		
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OID Resignation

JAH 0 8 2229 D CUSHING

## TRANSMITTAL LETTER

Division of Corporation	ns		
XAPT Corpo	pration		
Solvinger.	(Name of Corporation)		
DOCUMENT NUMBER:	P08000079366		
The enclosed Officer/Director	Resignation for a Corporation and fee are submitted for filing		
Please return all correspondence	ce concerning this matter to the following:		
Paul Sodhi or Gary Phillips			
(Name o	f Person)		
Phillips, Cantor & Shalek			
(Name of Fir	m/Company)		
4000 Hollywood Blvd., Suite 500	North		
(Add	ress)		
Hollywood, FL 33021			
(City/State a	nd Zip Code)		
For further information concer	ning this matter, please call:		
Paul Sodhi or Gary Phillips	954 966-1820		
(Name of Persor	at ( 954 966-1820 ) (Area Code & Daytime Telephone Number)		
Enclosed is a check for \$35.00	made payable to the Florida Department of State.		
Mailing Address:	Street Address:		
Amendment Section	Amendment Section		
Division of Corporation	•		
P.O. Box 6327	The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

19 NOV 25 PH 12: 00

Tallahassee, FL 32314

TO:

Amendment Section

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Ι,	Frank Squeri	hereby r	CEO, Secretary, and Treasurer
			(Title)
of	ХАРТ	Corporation	
		Name of Corporation)	
	P08000079366	, a corporation organized under the laws of the State	
	(Document Number, if known)	, a corporation orga	mized under the laws of the State of
	Florida		
		·	•
		hear and	
		(Signature of resigning of	icer/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