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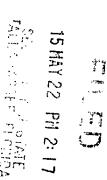
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COVER LETTER

Division of Corporations	- 1.5
SUBJECT: HWall X, Inc.	-ئىز ئارىخى ئارىخى
DOCUMENT NUMBER: POPOSOS 91841	
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for f	iling.
Please return all correspondence concerning this matter to the following:	
Barbara Palmer (Name of Person)	
Brian Palmer CPA PA (Name of Firm/Company)	
2937 Bee Ridge Rd, Ste 2	
Savasota FZ 34239 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Barbara Palmer # (941, 922-4744	

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

(Area Code & Daytime Telephone Number)

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

(Name of Person)

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

TO:

Amendment Section

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, 7	7
Florida Statutes, the undersigned, Brian Palmer, CPA (Name of Registered Agent)	35
hereby resigns as Registered Agent for Kuralia, The (Name of Corporation)	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last known addr	ess
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.	:h
(Signature of Resigning Agent)	
If signing on behalf of an entity:	
Brian Palmer (Typed or Printed Name)	
President (Capacity)	

Fee for filing this document:

\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314