P1000001727		
(Requestor's Name) (Address)	500184672955	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number)	08/30/1001011020 **35.00	
Certified Copies Special Instructions to Filing Officer:	FILED I AUG 30 AN 9: 17 SECRETARY OF STATE ALLAHASSEE, FEORIDA AMAGAMA	

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: APPAREO INC

(Name of Corporation)

DOCUMENT NUMBER: P10000011728

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rene Perras

(Name of Person)

Appareo, Inc.

(Name of Firm/Company)

215 SOUTH OLIVE AVE STE 300

(Address)

WEST PALM BEACH, FL 33401

(City/State and Zip Code)

For further information concerning this matter, please call:

Rene Perras

(Name of Person)

at (<u>561</u>) <u>653-3266</u> (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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. Kevin D. Quinlan	, hereby resign as Vice-President	
·)	(Title)	
ofAppareo, Inc		
(Name	of Corporation)	
P10000011728 (Document Number, if known)	_, a corporation organized under the laws of the State of	
Florida	TO AUG	נר
	ARY OF ASSEE, F	FILED
ß	FLORIDA	
<u>(2</u>	ignature 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