

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DRYPLEX INC.

(Name of Corporation)

DOCUMENT NUMBER: P10000012615

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

Please return all correspondence concerning this matter to the following:

ALAN DEVOS

(Name of Person)

DRYPLEX INC.

(Name of Firm/Company)

301 PLATT ST, #419

(Address)

TAMPA, FL 33606

(City/State and Zip Code)

For further information concerning this matter, please call:

ALAN DEVOS

at (813) 469-7844

(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


**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, MEGAN RICE, hereby resign as DIRECTOR
(Title)

of DRYPLEX INC.
(Name of Corporation)

P10000012615, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILED
11 JUL 28 PM 1:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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