

P10000028014

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

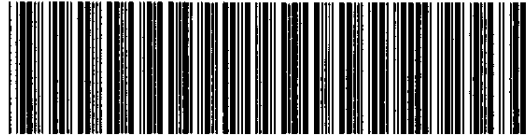
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUN 25 2014  
C. CARROTHERS

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: ELITE VISIONS ARCHITECTURAL SERVICES INC.,  
(Name of Corporation)

DOCUMENT NUMBER: P10000028014

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

Please return all correspondence concerning this matter to the following:

CRAIG AQUART

(Name of Person)

ELITE VISIONS ARCHITECTURAL SERVICES INC.

(Name of Firm/Company)

12038 KEY LIME BLVD

(Address)

WEST PALM BEACH FL 33412

(City/State and Zip Code)

For further information concerning this matter, please call:

TRICIA JOLICOEUR at ( 561 ) 389.2843

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

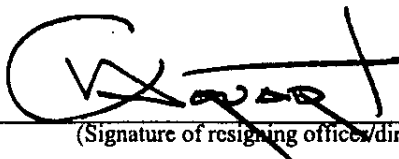
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, CRAIG AQUART, hereby resign as DIRECTOR  
(Title)

of ELITE VISIONS ARCHITECTURAL SERVICES INC.  
(Name of Corporation)

P10000028014, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(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

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