

PI 10000364138

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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JUL 23 2013  
R. WHITE

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13 JUL 19 PM 3:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** METROPOLITAN BLINDS CORP

(Name of Corporation)

**DOCUMENT NUMBER:** P11000036438

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

Please return all correspondence concerning this matter to the following:

PATRICIA COOPER

(Name of Person)

METROPOLITAN BLINDS CORP

(Name of Firm/Company)

6441 SW 163rd CT.

(Address)

MIAMI, FL. 33193

(City/State and Zip Code)

For further information concerning this matter, please call:

PATRICIA COOPER at (305) 282-4873

(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

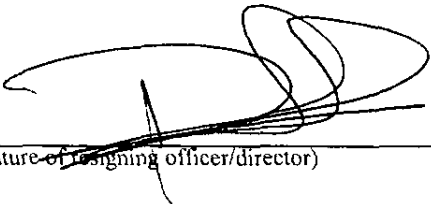
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, PATRICIA COOPER, hereby resign as VICE-PRESIDENT, TREASURER, SECRETARY & DIRECTOR  
(Title)

of METROPOLITAN BLINDS CORP.  
(Name of Corporation)

P11000036438, 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

**FILED**  
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**TALLAHASSEE, FLORIDA**