P130000 58990

(Red	questor's Name)	
(Add	dress)	
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(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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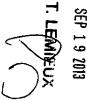
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SECRETARY OF STATE TALLAHASSEE, FLORIDA



TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: EXPERIPRESS, INC	
(Name of Corporat	ion)
DOCUMENT NUMBER: P13000058990	
The enclosed Officer/Director Resignation for a Corporation a	and fee are submitted for filing
Please return all correspondence concerning this matter to the	following:
Andrew Caine	
(Name of Person)	
Experipress, Inc (Name of Firm/Company)	
(Name of Firm/Company)	
121 Cypress Trace	
(Address)	
Royal Palm Beach, FL 33411	<u></u> ,
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Andrew Caine at (561)6	601-5451 & Daytime Telephone Number)
(Name of Person) (Area Code	& Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida D	epartment of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center Corporations	s Circle
Tallahassee, FL 32314 Tallahassee, FL 32301	

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Andrew Caine	, hereby resign as Vice Pres and Treasurer		
7	(Title)		
of Experipress, Inc.			
(Name	of Corporation)		
P13000058990 (Document Number, if known)	, a corporation organized under the laws of the State of		
Florida	_ .		
	Signature of resigning officer/director)	APPROVE AND FILED 13 SEP 12 PH 1 SECRETARY OF ST TALLAHASSEE, FIND	

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