P1300059711		
(Requestor's Name) (Address)	800251005068	
(City/State/Zip/Phone #)	08/26/1301019020 **35.00	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	FILED 13 AUG 26 PH 4: 00 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Office Use Only	C. LEMMIS AUG 2 8 2013 EXAMMINER	

TRANSMITTAL LETTER

TO: Amendment Section **Division of Corporations**

SUBJECT:	E-Vapor, Inc.	
	(Name of Corporation)	
DOCUMENT NUMBER:	P13000069711	

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

Please return all correspondence concerning this matter to the following:

(Name of Person)

(Name of Firm/Company)

8210 NW 10 St Apt 2 (Address)

Miani Florida 33126 (Oity/State and Zip Code)

For further information concerning this matter, please call:

<u>(Name of Person)</u> at (<u>305</u>) <u>540-8768</u> (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

156C11 LOTTS, hereby resign as_ President (Title) E-VAPOY, INC. (Name of Corporation) of 711 ____, a corporation organized under the laws of the State of (Document Number, if known) orida FI



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