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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : EAGLE TAX REPRESENTATION, CORP.

Account Number : 120070000037 Phone

: (954)532-3842

Fax Number

: (954)532-3847

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

COR AMND/RESTATE/CORRECT OR O/D RESIGN XTREME KITCHEN AND BATH REMODELING INC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$35.00 |

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TRANSMITTAL LETTER

| то: | Amendment Section Division of Corporations |
|--------|--|
| | Xtreme Kitchen and Bath Remodeling Inc (Name of Corporation) |
| DOC | UMENT NUMBER: P14000012670 |
| The c | nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing |
| Please | e return all correspondence concerning this matter to the following: |
| Lec | ocadio Patitucci |
| Ea | (Name of Person) gle Tax Representation Corp (Name of Firm/Company) |
| 549 | 93 Wiles Road Ste 105 (Address) |
| Co | conut Creek, FL 33073 |
| _ ^ | (City/State and Zip Code) |
| For fu | rther information concerning this matter, please call: |
| Pa | ulo Oliveira, EA (Name of Person) at (954), 532-3842 (Area Code & Daytime Telephone Number) |
| | (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,} VALERIA PATITUCCI | , hereby resign as Vice President |
|---------------------------------|---|
| | (Title) |
| of Xtreme Kitchen and Bath | n Remodeling Inc |
| (Name of Corporation | on) |
| P14000012670 ,a corpor | ration organized under the laws of the State of |
| (Document Number, if known) | |
| Florida | |

y Valeria Patituaci
(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 Tallahassec, Florida 32314