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(R	lequestor's Name)	 -			
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COVER LETTER

·	CO	VER	R LETTI	ER			20 1
TO: Amendment Se Division of Co							20 JAN 23 PH 2: 28
SUBJECT:	Divine C)esign	and Floor C	overing,	Inc.		45
(Name of Corporation)							6
DOCUMENT NUMBI	R: P18000009382						
The enclosed Resignat Please return all corres	_	_	-			ubmitted fo	r filing.
	James D. Dati						
	(Name of Person)						
	Schoeneck & King, PLL						
(Na	me of Firm/Company)		,				
4001	Famiami Trail N., Suite 1	105					
	(Address)						
	Naples, FL 34103						
(Cit	y/State and Zip Code)						
For further information	concerning this ma	itter, j	please call	:			
	D. Dati	at			9-3845		_
(Name	of Person)		(Area Co	de & Da	aytime Teleph	one Number	,

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

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

Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0	0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	James D. Dati
	(Name of Registered Agent)
hereby resigns as Registered Agent for	Divine Design and Floor Covering, Inc.
, , , ,	(Name of Corporation)
P18000009382	
(Document Number, if known)	
	e above listed corporation at its last known address continued on the 31st day after the date on which
If signing on behalf of an entity:	ure of Resigning Agent)
(Тур	ed or Printed Name)
	(Capacity)

Fee for filing this document:

\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314