

P97000020190

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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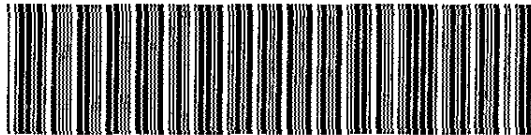
(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** FIRST CLASS BATH SYSTEMS, INC.

(Name of corporation)

**DOCUMENT NUMBER:** P97000020190

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KAREN QUINN

(Name of person)

FIRST CLASS BATH SYSTEMS INC.

(Name of firm/company)

1219 Cape Coral Parkway, E.

(Address)

Cape Coral, Florida 33904

(City/state and zip code)

For further information concerning this matter, please call:

M. Daniel Sasso, Esq.

(Name of person)

at ( 239 ) 542-1355

(Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

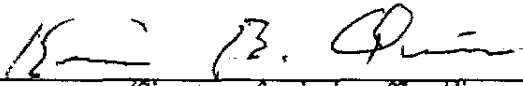
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, KEVIN B. QUINN, hereby resign as President/Director  
(Title)

of FIRST CLASS BATH SYSTEMS INC  
(Name of Corporation)

P97000020190, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(Signature of resigning officer/director)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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