(Requ	estor's Name)
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(City/S	State/Zip/Phor	ne #)
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COVER LETTER

TO:	Amendment Section Division of Corporations
SUB.	JECT: Prestige Pool Service, Inc.
	(Name of Corporation)
DOC	UMENT NUMBER: P97000101596
The e	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Pleas	e return all correspondence concerning this matter to the following:
Fra	ncisco Marziano
	(Name of Person)
Pres	stige Pool Service, Inc.
	(Name of Firm/Company)
330	1 SW 136th Ave.
	(Address)
Mira	amar, FL 33027
	(City/State and Zip Code)
For fi	urther information concerning this matter, please call:
Fran	cisco Marziano at (954) 431-1365 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	sed is a check for \$35.00 made payable to the Florida Department of State.
Amen Divisi Clifto 2661	Mailing Address: Amendment Section ion of Corporations n Building Executive Center Circle passee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, Monica Marziano	, hereby resign as Treasurer	
	(Title)	
of Prestige Pool Service, Inc.		
(Nar	ne of Corporation)	
P97000101596 (Document Number, if known)	, a corporation organized under the laws of the State of	
Florida		
	\mathcal{A}	
	(Signatury 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
Tallahassee, Florida 32314

12 APR 30 AM 8: 31

SECRETARY OF STATE OIVISION OF CORPORAGIONS