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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

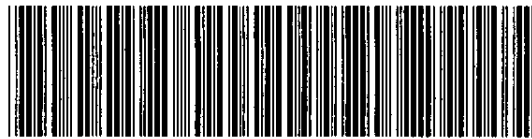
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08 AUG 27 PM 3:27  
DEPT. OF STATE  
TALLAHASSEE, FLORIDA

T. Roberts SEP 02 2008

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LIFETIME Cabinetry Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** \_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

James Harcus  
(Name of Person)

Lifetime Cabinetry, Inc.  
(Name of Firm/Company)

5040 Deleon Oaks Ct  
(Address)

Deleon Springs, FL 32130  
(City/State and Zip Code)

For further information concerning this matter, please call:

FRANK HARCUS at (386) 734-2889  
(Name of Person) (Area Code & Daytime Telephone Number)

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

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Mailing Address:**  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**


**FILED**  
**08 AUG 27 PM 5:27**  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

I, James HARCUS, hereby resign as Vice President  
(Title)

of Lifetime Cabinetry, Inc.  
(Name of Corporation)

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

FLORIDA

  
(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  
Tallahassee, Florida 32314