

P98000007338

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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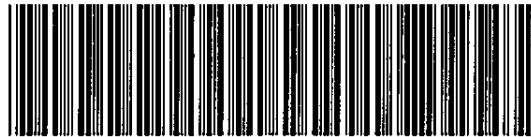
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Tropical Fabrics and Wallcoverings, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P98000007338

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

Please return all correspondence concerning this matter to the following:

Michele Nessen Mikulskis

(Name of Person)

(Name of Firm/Company)

14675 SW. 16th Street

(Address)

Davie, FL 33325

(City/State and Zip Code)

For further information concerning this matter, please call:

Michele Mikulskis

(Name of Person)

at (305) 467-6706

(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**

I, Michele Nessen Mikulskis, hereby resign as C.O.O.
(Title)

of Tropical Fabrics and Wallcoverings, Inc.
(Name of Corporation)

P98000007338, 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