

PA9000094194

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Right Remodeling, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P99000094194

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

Please return all correspondence concerning this matter to the following:

Mara Ltaif

(Name of Person)

(Name of Firm/Company)

7300 SW 36 Street

(Address)

Miami, FL 33155

(City/State and Zip Code)

For further information concerning this matter, please call:

Mara Ltaif

(Name of Person)

at ( 305 ) 607-9397

(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

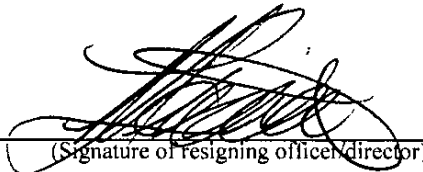
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Mara Ltaif, hereby resign as T, S - Treasurer, Secretary  
(Title)

of Right Remodeling, Inc.,  
(Name of Corporation)

P99000094194, 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

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**TALLAHASSEE, FLORIDA**