

PO 5000011703

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

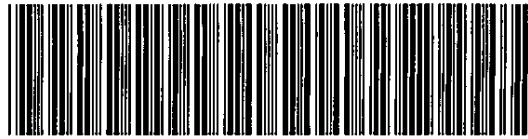
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: All Cell Accessories, Inc.

(Name of Corporation)

DOCUMENT NUMBER: PO5000011703

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

Please return all correspondence concerning this matter to the following:

Brittany Fraska

(Name of Person)

All Cell Accessories, Inc.

(Name of Firm/Company)

16934 Temple Blvd

(Address)

Loxahatchee, FL 33470

(City/State and Zip Code)

For further information concerning this matter, please call:

Brittany Fraska at (561) 644-8473

(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**

I, Brittany Fraska, hereby resign as VP, Treasurer
(Title)

of All Cell Accessories, Inc.
(Name of Corporation)

PO5000011703, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Brittany Fraska
(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