N09000000137

(Re	equestor's Name)	
, (Ac	ddress)	
(Ac	ldress)	
(City/State/Zip/Phone #)		
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SECREMENT OF STATE ALLESTEE FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: SECOND TIME ARC	DUND THRIFT SHOPPE, INC.
	(Name of Corporation)
DOCUMENT NUMBER: N090	00000137
The enclosed Officer/Director Resig	gnation for a Corporation and fee are submitted for filing
Please return all correspondence cor	ncerning this matter to the following:
BENJAMIN J. BROWN	
(Name of Pers	on)
(Name of Firm/Co	empany)
5888 RENAULT DRIVE WEST	
(Address)	
JACKSONVILLE, FL 32244	•
(City/State and Zip	p Code)
For further information concerning	this matter, please call:
BENJAMIN J. BROWN	at (904) 419-8689 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 mad	e payable to the Florida Department of State.
Street Address: Amendment Section	Mailing Address: Amendment Section
Division of Corporations	Division of Corporations
Division of Corporations Clifton Building 2661 Executive Center Circle	Post Office Box 6327 Tallahassee, FL 32314
Tallahassee, FL 32301	•

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, BENJAMIN J. BROWN	, hereby resign as CFO (Title)
of SECOND TIME AROUND THRIFT (Name of Cor	
N0900000137 , a c	orporation organized under the laws of the State of
FLORIDA	
Blygamu- (Signati	Mon- incot resigning officer/director) 22
ett in	G 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

Subscribed and sworn before me, this day of october, do a Notary Public in and for DVA County, State of Signature

My Commission expires

HENRY CULPEPPER
Notary Public - State of Florida
My Comm. Expires Jan 3, 2014
Commission # DD 949583