

PO1000013966

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

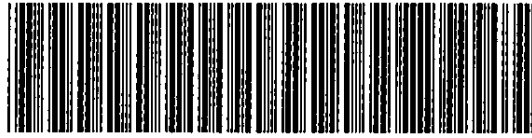
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700079267057

09/07/06--01010--023 \*\*35.00

FILED  
06 SEP -7 PM 3:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Handwritten initials*

• **COVER LETTER** •

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Brands Only, Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** 010000 13966

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

Please return all correspondence concerning this matter to the following:

Aldaron Knewitz  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

334 East Lake Rd. #186  
(Address)

Palm Harbor FL 34685  
(City/State and Zip Code)

For further information concerning this matter, please call:

Aldaron Knewitz at (727) 631-4748  
(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

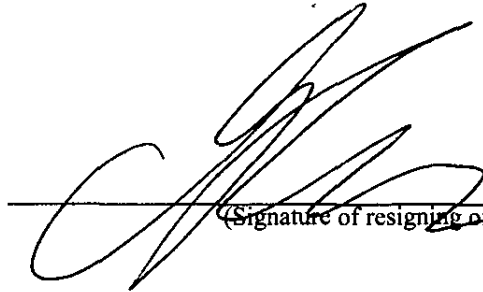
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Allan Ron Knewitz, hereby resign as President  
(Title)

of Brands Only, Inc.  
(Name of Corporation)

01000013966, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida



(Signature of resigning officer/director)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 SEP -7 PM 3:32

FILED

**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