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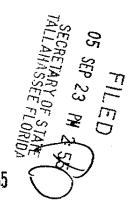
. (Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	∍#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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COVER LETTER

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TO: Amendment Section Division of Corporations
SUBJECT: Accepts + Designs, Inc. (Name of Corporation)
DOCUMENT NUMBER: P020000 40 360
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Person)
(Name of Firm/Company)
274/ S. W 27 AVR (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
DC55ince Zapsas at (305) 860 - 8280 (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,	Lukas Zarsas hereby resign as Vice President/Schetny/Trun.
of_	Aecen 1s + Designs, Inc. (Name of Corporation)
	(Document Number, if known), a corporation organized under the laws of the State of
	Florida
	SECRETARY OF STATE Of resigning officer/director) FILED (Signature of resigning officer/director) FILED (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