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(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Do	cument Number)	<u></u>
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
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Office Use Only



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of the store

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: KMC TRIM INC (Name of Corporation)
DOCUMENT NUMBER: PO 2000087090
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Michael G. Couey (Name of Person)
(Name of Firm/Company)
(Name of Firm/Company)
5628 Pennington Rd (Address)
(Address)
Crestview FL 32539
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (850) 683-1199 (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, Katherine D. Mason	, hereby resign as	Presiden	Title)	
of KMC Thim In (Name o	of Corporation)			<u> </u>
(Document Number, if known)	_, a corporation organized und	der the laws of t	he State of	
FL				
Karharine (Si	D. Wasen ignature of resigning officer/direct	or)	OG APR 21 AM SECRETARY OF ALLIAHASSEE, F	
			M 9: 42 STATE FLORID	D

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