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	equestor's Name)	
(Re	equestors marrier	
(Ad	ldress)	
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(Ci	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	curnent Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE DIVISION OF CORPORATIONS

07/05/05--81036--006 **35.00

OD Resign.

07/12/05

Do

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Focused on Details, Inc. (Name of Corporation) DOCUMENT NUMBER: P 02000126914
DOCUMENT NUMBER: P 02000126914
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)
2413 Lake Debra Dr. # 1211 (Address)
ORlando FL 32835 (City/State and Zip Code)
For further information concerning this matter, please call:
Ronald R. Strawn at (407) 341-1743 (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 409 E. Gaines Street Tallahassee, FL 32399

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

[,	Elena A. Strawn, hereby resign as Presiden (Title)	vt_
of	Focused on Details, Inc. (Name of Corporation)	······································
P	(Document Number, if known) (Document Number, if known)	of
	Florida	
	Eleun Stridun	
	(Signature of resigning officer/director)	DIVISI 05
		OS JUL -5
	FILING FEE IS \$35.00	okpokatii PM 3: 0

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Make checks payable to Florida Department of State and mail to: