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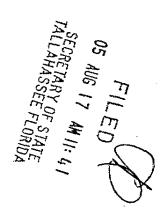
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Office Use Only



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* Saith WAS 1 9 2003

TRANSMITTAL LETTER

. -: -:

TO: Amendment Section Division of Corporations	
SUBJECT: Stile Works to C. (Name of Corporation)	
DOCUMENT NUMBER:	-
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Carla Cline (Name of Person)	*
Style Works Inc (Name of Firm/Company)	
13/1 S. Diger She	1
Flace But, Fl 32136 (City/State and Zip Code)	
For further information concerning this matter, please call:	•
(Name of Person) at (386) 439- (Area Code & Daytime Telephone Number)	

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

i, Carla Oline	, hereby resign as	V-president	> Secre
of Style W	DYKS, INE.	<u>ــــــــــــــــــــــــــــــــــــ</u>	······································
(Document Number, if known)	a corporation organized un	der the laws of the St	ate of
	(Signature of resigning officer/direct		F1 05 AUG SECRETA
	FILING FEE IS \$35.00	šee florid;	LED 17 AHII: 4 RY OF STATE

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

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