P04000107358

(Requestor's Name)				
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(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
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Certified Copies Certificates of Status				
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COVER LETTER

SUBJECT: PAT'S DETAIL & ACCESSORIES, INC. (Name of Corporation) P04000107358 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: JAMES H COLLIER SR (Name of Person) COLLIER'S ACCOUNTING SERVICE, INC. (Name of Firm/Company) 14055 TENNYSON DRIVE (Address) HUDSON, FL 34667 (City/State and Zip Code) For further information concerning this matter, please call: JAMES H COLLIER SR (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

Amendment Section Division of Corporations

Post Office Box 6327

Tallahassee, FL 32314

Street Address:

Clifton Building

Amendment Section
Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, KRISTA M. DZIKONSKI	, hereby resign as PRESIDENT			
	,,g	(7)	Title)	
of PAT'S DETAIL & ACCESSORII				
(Name o	f Corporation)			
P04000107358	, a corporation organized un	der the laws of th	e State of	
(Document Number, if known)				
FLORIDA			1 , 0	
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Z JAPAU (Si	gnature of resigning officer/direc	tor)	# 52 TATE ORID	

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