

P05000 130629

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

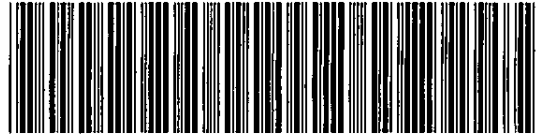
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

O/D Resign.

8/4/08

Dc

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ACE CLUTCH INC

(Name of Corporation)

DOCUMENT NUMBER: P05000130629

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PATRICK SMITH

(Name of Person)

ACE CLUTCH INC

(Name of Firm/Company)

30 E 2ND STREET

(Address)

CHULUOTA FL 32766

(City/State and Zip Code)

For further information concerning this matter, please call:

Patrick Smith
(Name of Person)

at (407) 538-3432
(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, PATRICK SMITH, hereby resign as DIRECTOR
(Title)

of ACE CLUTCH INC
(Name of Corporation)

P05000130629, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(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

FILED
08/06/28 AM 8:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA