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| Certified Copies Certificates of Status | | s of Status |
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| Special Instructions to | Filing Officer: | |
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Office Use Only



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officer Resignation
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COVER LETTER

Amendment Section Division of Corporations

TO:

| • |
|--|
| SUBJECT: Stokes Aluminum, Inc. (Name of Corporation) |
| DOCUMENT NUMBER: POSOOO165608 |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing |
| Please return all correspondence concerning this matter to the following: |
| Sohn Bass (Name of Person) |
| Stokes Aluminum, Inc (Name of Firm/Company) |
| • • • |
| 5246 Allamanda DI. (Address) |
| , |
| New Port Richey, FL 34652 (City/State and Eip Code) |
| For further information concerning this matter, please call: |
| Sohn 753 at (727) 460.0292 (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 Post Office Box 6327 Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

ZOUR JUL 14 PM 3: 26

SECRETARY OF STATE of Stokes Aluminum Inc.

(Name of Corporation)

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

Florida

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