## P06000094555

| (Re                     | equestor's Name)   |             |  |  |  |
|-------------------------|--------------------|-------------|--|--|--|
| (Ad                     | ldress)            |             |  |  |  |
| (Ad                     | ldress)            |             |  |  |  |
| (Cit                    | ty/State/Zip/Phone | e #)        |  |  |  |
| PICK-UP                 | ☐ WAIT             | MAIL        |  |  |  |
| (Bu                     | siness Entity Nar  | ne)         |  |  |  |
| (Document Number)       |                    |             |  |  |  |
| Certified Copies        | _ Certificates     | s of Status |  |  |  |
| Special Instructions to | Filing Officer:    |             |  |  |  |
|                         |                    |             |  |  |  |
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Office Use Only



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SECRETARY OF STATE
SECRETARY OF STATE

010 Resign. 04/14/08 De

## **COVER LETTER**

| TO: Amendment Section Division of Corporations  |
|---|
| SUBJECT: Maximum Detailing, Inc. (Name of Corporation)  |
| DOCUMENT NUMBER: PO6000094555   |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.   |
| Please return all correspondence concerning this matter to the following:   |
| Emmanuel S. Decius (Name of Person)   |
| Maximum Detailing Inc. (Name of Firm/Company)   |
| 2521 NE 3rd Terrace (Address)   |
| Pompano Beach, FL 33064 (City/State and Zip Code)   |
| For further information concerning this matter, please call:  |
| Emmanuel Decius at (954) 682-3517 (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: Afflendment Section Division Division of Corporations Cfilton Building Post Office Box 6327 Tallahassee, FL 32314  Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314 |



March 25, 2008

EMMANUEL S. DECIUS 5227 PALM BROOK CIRCLE WEST PALM BEACH, FL 33417

SUBJECT: MAXIMUM DETAILING, INC.

Ref. Number: P06000094555

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

## RESIGNING OFFICER MUST SIGN THE DOCUMENT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell Regulatory Specialist II

Letter Number: 408A00017666

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| ł,  | Emmanuel                               | Decius                              | , hereby resign as_              | Preside        | nt<br>(Title)        |               |
|-----|--|-------------------------------------|----------------------------------|----------------|----------------------|---------------|
|     |  | ·                                   |                                  |                | (Title)              |               |
| of_ | Maximum                                | Detailing<br>(Name of O             | Trc.                             |                |                      | <del></del> , |
|     | Polopo 094655<br>(Document Number, if) | , a known)                          | corporation organized un         | der the laws o | f the State of       |               |
|     | Florida                                | ··································· |                                  |                |                      |               |
|     | 4                                      | 1                                   |                                  |                |                      |               |
|     | -6-                                    | (Signa                              | iture of resigning officer/direc | tor)           | 08 APR 11 SEURETARY  |               |
|     |  | FILI                                | NG FEE IS \$35.00                |                | AM 8: 55<br>OF STATI | O             |

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

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