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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies _____ Certificates of Status Special Instructions to Filing Officer:





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SECRETARY OF STATE
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COVER LETTER

SUBJECT: Stuart Bare Bones Inc. (Name of Corporation)			
DOCUMENT NUMBER: P9900000 8125			
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Joseph J. Reese			
Stuart Bare Bones, Inc. (Name of Firm/Company)			
4817 SE Dixie Hwy (Address)			
Strart Ft 34997 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Joseph J. Reese at (772) 349-7366 (Area Code & Daytime Telephone Number)			

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

Amendment Section Division of Corporations

TO:

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, _	Frank J. Kilian	, hereby resign as	Director	
_			(Title)	
of_	Stuart Bare	Bones, 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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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