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Requester's Name

Karen S. (Stiles) Zarka
1100 16th Street
Palm Harbor, FL 34683

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*****35.00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

02 JUN 10 PM
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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- | | | |
|------------------------------------|---|--|
| ☐ Walk in | ☐ Pick up time _____ | ☐ Certified Copy |
| ☐ Mail out | ☐ Will wait | ☐ Certificate of Status |
| ☐ Photocopy | | |

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

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6/11
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Examiner's Initials

OFFICER / DIRECTOR RESIGNATION

I, Karen S. Stiles, hereby resign as President
(Title)

of Stiles Auto Repair, Inc.
(Name of Corporation)

a corporation organized under the laws of the State of Florida

and affirm that the corporation has been notified in writing of the resignation.

Karen S. Stiles
(Signature of resigning officer/director)

FILED
02 JUN 10 PM 11:45
SECRETARY OF STATE
TALLAHASSEE-FLORIDA

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314