

N04792

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Document Number)

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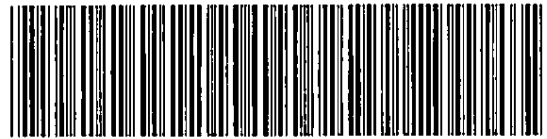
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Resignation of Officers
_____ (Name of Corporation)

DOCUMENT NUMBER: Caron of Florida, Inc.

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Jennifer Savarese Farr
_____ (Name of Person)

Caron of Florida, Inc.
_____ (Name of Firm/Company)

7789 NW BEACON SQUARE BLVD#101
_____ (Address)

Boca Raton, FL 33487
_____ (City/State and Zip Code)

For further information concerning this matter, please call:

Jennifer Savarese Farr at (610) 743-6207
_____ (Name of Person) (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
P.O. Box 6327
Tallahassee, FL 32314

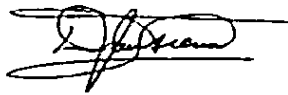
Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Douglas Tieman, hereby resign as President
(Title)

of Caron of Florida, Inc.
(Name of Corporation)

N04792, 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