

PO6000018324

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

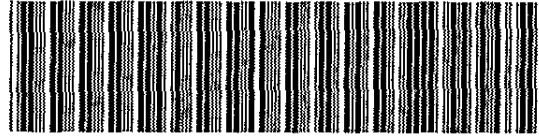
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Roberts SEP 27 2006

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Castle Override, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P06000018324

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Spiegel & Utrera, P.A. - Registered Agent

(Name of Person)

Spiegel & Utrera, P.A. - Registered Agent

(Name of Firm/Company)

1840 SW 22nd Street, 4th Floor

(Address)

Miami, FL 33145

(City/State and Zip Code)

For further information concerning this matter, please call:

Gary T. Schmitt at ( 561 ) 445-0375

(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:**

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

**Mailing Address:**

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

**cc: Melania Ferrer, DPS**  
**217 Woodland Drive**  
**Plano, IL 60545**

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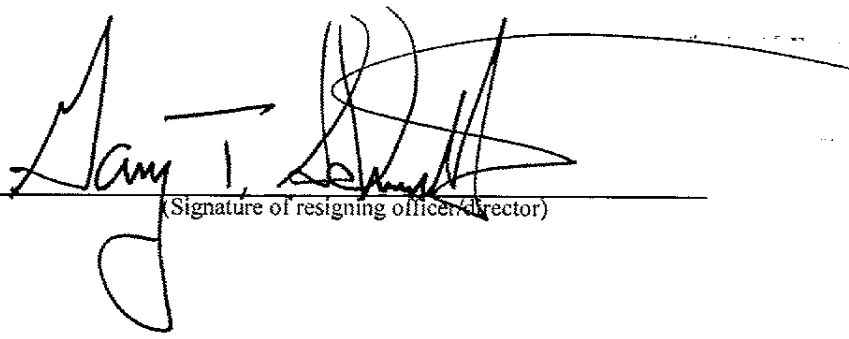
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, Gary T. Schmitt, hereby resign as Director, V.P. & Treasurer  
(Title)

of Castle Override, Inc.  
(Name of Corporation)

P06000018324, 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