POWOOA11858

(Re	equestor's Name)		
(Address)			
(Ac	ldress)		
(Ci	ty/State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			
:			





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07/02/07--01048--017 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: 4Th and Jostball, Inc. (Name of Corporation)
DOCUMENT NUMBER: <u>P000 00024 858</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kafael F. Luciano (Name of Person)
Joffa Margement Group, UC (Name of Firm/Company)
P.O. Box 2((Address)
Winter Park FL 32789 (City/State and Zip Code)
For further information concerning this matter, please call:
Kafael F. Luciano at (401), 920-3532 (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
Post Office Box 6327
Tallahassee, FL 32314

CR2E044(08/05)

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, Rafael F. Juciano	, hereby resign as Director		<u>-</u>	
V		(Title)		
of 4th and I Jostball	of Corporation)			•
(Document Number, if known)	, a corporation organized under the laws o	of the Sta	ite of	
Japoel F.	Signature of resigning officer/director)	SECKE JARY OF STATE	07 JUL -2 AM 8:51	

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