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SECRETARY OF STATE

Off. Res.

SEP 1 7 2012 T. BROWN

COVER	LETTER
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TO: Amendment Section Division of Corporations

SUBJECT:	All	Craftsmen	Enterprises.	Inc.	
_			(Name of Corporation))	

DOCUMENT NUMBER: PO000049477

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

Please return all correspondence concerning this matter to the following:

(Name of Person)

(Name of Firm/Company)

8936 Handel Loop (Address)

Land O' Lakes, FL 34677 (City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person) at (<u>813</u>) <u>849</u>-<u>899</u> (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

	OFFICED / DIDECTOR DESIGNATION	12 SEP 12 PH 2: 41
I, <u>Tho</u>	ormas M. DeCleene, hereby resign as VP-07	$\frac{P_{H}}{(\text{Title})} = \frac{12}{P_{H}} \frac{P_{H}}{2.4}$
of <u>Al</u>	11 Craftsmen Enterprises Inc. (Name of Corporation)	,
(Docume	nent Number, if known), a corporation organized under the laws of	f the State of
Flor	iàa	
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t,

Thomas (Signature of resigning officer/director)

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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