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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officers	
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Office Use Only



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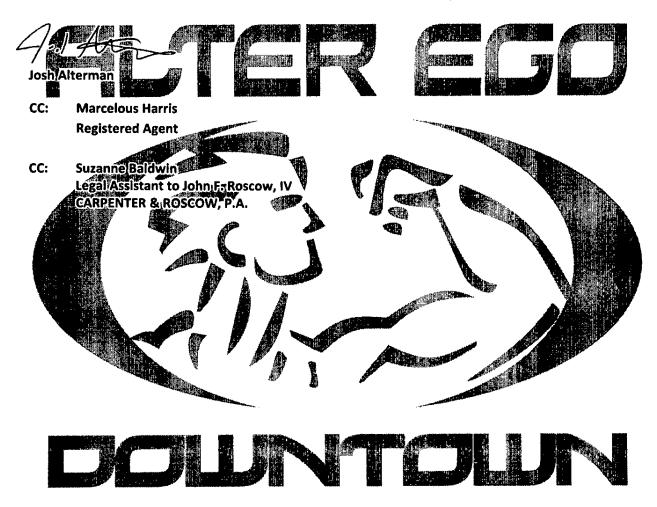
officer Resignation

18 12-12-08



Dear Department of State:

Please be advised that I am resigning as officer of the corporation known as FAM Distribution, Inc., Document Number P02000068559, and am disassociating with said corporation."



COVER LETTER

TO:	Amendment Section Division of Corporations		
SUBJ	BJECT: FAM DISTRIBUTION, INC.		
	(Name of Corporation)		
DOCUMENT NUMBER: P02000068559			
The e	enclosed Officer/Director Resignation for a Corporation and fee are submitted for	filing.	
Please	se return all correspondence concerning this matter to the following:		
Johi	hn F. Roscow, IV		
	(Name of Person)		
Carı	rpenter & Roscow, P.A.		
	(Name of Firm/Company)		
560	08 NW 43rd Street		
	(Address)		
Gair	ninesville, FL 32653		
~~~~	(City/State and Zip Code)		
For fi	further information concerning this matter, please call:		
John	(Name of Person) at (352) 373-7788 (Area Code & Daytime Telephone Num		
	(Name of Person) (Area Code & Daytime Telephone Nun	ıber)	
Enclo	losed is a check for \$35.00 made payable to the Florida Department of State.		
Amer Divisi Clifto 2661	tet Address: Endment Section Sision of Corporations Ton Building I Executive Center Circle  State Address:  Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314		

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



I,	, hereby resign as President (Title)
of FAM DISTRIBUTION INC.	e of Corporation)
P02000068559 (Document Number, if known)	, a corporation organized under the laws of the State of
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