

PD2000/32540

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

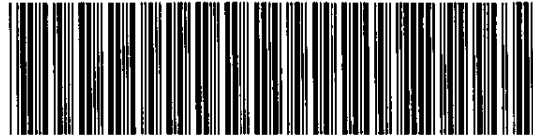
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900240001449

09/28/12--01006--020 **35.00

2012 SEP 28 PM 12:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Off Resign

OCT -3 2012

T. LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Officer resignation for a Corporation

(Name of Corporation)
P02000132540
DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

William Langston

(Name of Person)

Cherokee Divisions Inc.

(Name of Firm/Company)

P.O. Box 540721

(Address)

Merritt Island, FL 32954

(City/State and Zip Code)

For further information concerning this matter, please call:

William Langston at (321) 302-3365

(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED

2012 SEP 28 PM 12:30

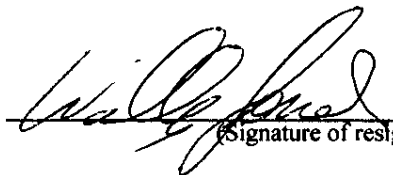
**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

I, William Jones, hereby resign as VP
(Title)

of Cherokee Divisions Inc
(Name of Corporation)

P02000132540, 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