

P03000033143

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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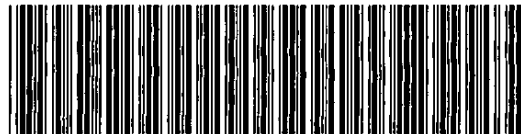
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: CHRISTOPHER-LYN COMPANY, INC.  
(Name of Corporation)

DOCUMENT NUMBER: PO3000033143

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

Please return all correspondence concerning this matter to the following:

BRYAN C. PHIFER  
(Name of Person)

CHRISTOPHER-LYN COMPANY, INC.  
(Name of Firm/Company)

4140 FAISON AVE  
(Address)

SPRING HILL, FL 34608  
(City/State and Zip Code)

For further information concerning this matter, please call:

DENNIS R. PHIFER, PRES. at ( 352 ) 683-2127  
(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

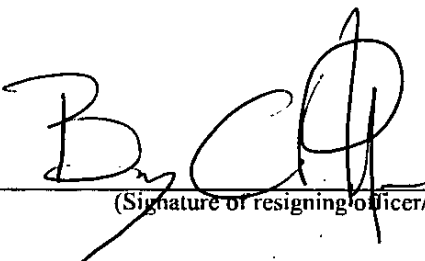
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, BRYAN C. PHIFER, hereby resign as SEC.  
(Title)

of CHRISTOPHER-LYN COMPANY, INC.  
(Name of Corporation)

P03000033143, 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

**FILED**  
**07 DEC -7 PM 4:23**  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA