

P03000073236

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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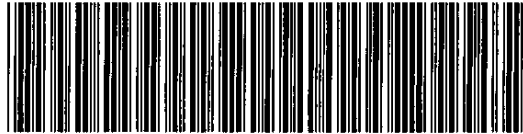
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

1-25-07

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CODE & COURT SERVICES, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P03000073236

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

Please return all correspondence concerning this matter to the following:

OLIVER J. LANGSTADT, ESQ.

(Name of Person)

LANGSTADT PAULY CHARTERED

(Name of Firm/Company)

815 Ponce de Leon Blvd.

(Address)

Coral Gables, FL 33134

(City/State and Zip Code)

For further information concerning this matter, please call:

Oliver J. Langstadt, Esq. at ( 305 ) 648-3909  
(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, BEVERLYN COOKE, hereby resign as PRESIDENT  
(Title)

of CODE & COURT SERVICES, INC.  
(Name of Corporation)

P03000073236, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

**FILED**  
**08 JAN 22 PM 2:15**  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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