

P03000/30619

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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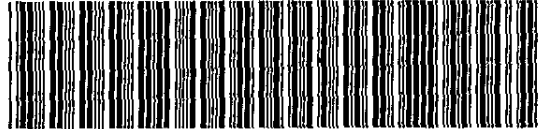
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

077/DIC resign
MAD 5/26

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: C C BUSINESS PLUS, CORP.
(Name of Corporation)

DOCUMENT NUMBER: P03000130619

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

Please return all correspondence concerning this matter to the following:

CARLOS E CASTRO

(Name of Person)

C C BUSINESS PLUS, CORP.

(Name of Firm/Company)

6937 BAY DRIVE # 205

(Address)

MIAMI BEACH, FL 33141

(City/State and Zip Code)

For further information concerning this matter, please call:

LISA MARIE BRYANT

(Name of Person)

at (305) 672-6773

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, LARRY JOSEPH KNOX, hereby resign as PRESIDENT
(Title)

of C C BUSINESS PLUS CORP
(Name of Corporation)

P03000130619, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Larry Joseph Knox
(Signature of resigning officer/director)

FILED
04 MAY 21 PM 12:12
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