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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Chris Perrone Ser	vices, Inc.
SCENE I.	(Name of Corporation)
DOCUMENT NUMBER: PO	400008046
The enclosed Officer/Director Re	signation for a Corporation and fee are submitted for filing
Please return all correspondence of	concerning this matter to the following:
Chris Perrone	
(Name of Pe	erson)
Chris Perrone Services, Inc.	
(Name of Firm/	Company)
4611 Masefield Place	
(Addres	s)
Sarasota, FL 34241	
(City/State and	Zip Code)
For further information concerning	g this matter, please call:
Debbie Perrone	at (941) 371-2276 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 ma	ade 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

y resign as Vice President (Title)
,
rganized under the laws of the State of
SECULIAN SEE 23 AN 10: 31

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