

PO4000067811

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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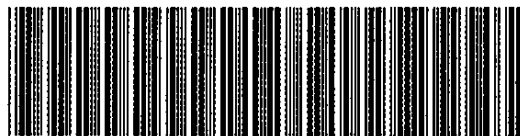
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

SEP 25 2006

Handwritten initials or signature

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CROWN PROFIT SYSTEMS, INC.
(Name of Corporation)

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:

ROLAND A. FERNANDEZ
(Name of Person)

CROWN PROFIT SYSTEMS, INC.
(Name of Firm/Company)

17838 N.E. 5 AVE.
(Address)

MIAMI, FL 33162
(City/State and Zip Code)

For further information concerning this matter, please call:

ROLAND FERNANDEZ at (305) 807-1929
(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, Michael Gerry, hereby resign as Vice-Pres.
(Title)

of CROWN PROFIT SYSTEMS, INC.
(Name of Corporation)

_____, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA.

Michael Gerry
(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

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