P04000105235

(Re	equestor's Name)	
(Ad	ldress)	•
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
<u></u>	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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TALL AHASSEE FLORIDA

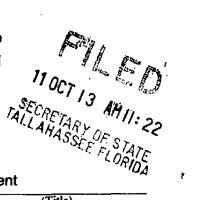
COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: C & F Classic	: Rock, Inc.
SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER:_	P04000105235
The enclosed Officer/Direct	or Resignation for a Corporation and fee are submitted for filing
Please return all corresponde	ence concerning this matter to the following:
Travis Crews	
(Name	e of Person)
C & F Classic Rock, Inc.	
(Name of	Firm/Company)
9183 River Forest Cove	
(A	ddress)
Webster, Florida 33597	
(City/State	e and Zip Code)
For further information conc	terning this matter, please call:
Travis Crews	at (813) 376-9910 (Area Code & Daytime Telephone Number)
(Name of Per	son) (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,	, hereby resign as	President (Title)
of C & F Classic Rock Inc (Nam	e of Corporation)	
P04000105235 (Document Number, if known)	, a corporation organized u	nder the laws of the State of
Florida	· •	
1		

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

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