

PD4 DDO 138842

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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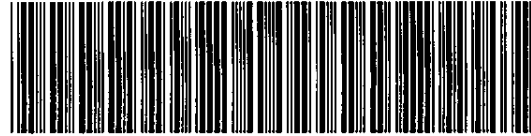
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Triple Crown Corporation of Cherokee Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** P04000138842

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

Please return all correspondence concerning this matter to the following:

DAVID D. DOLL SR  
(Name of Person)

TRIPLE CROWN CORP OF Cherokee INC  
(Name of Firm/Company)

PO BOX 1243  
(Address)

Ellenton FL 34222  
(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID D. DOLL SR at ( 941 ) 224-3770  
(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, Nicholas B. DOLL, hereby resign as Vice President  
(Title)

of TRIPLE CROWN CORPORATION OF Cherokee INC.  
(Name of Corporation)

P04000138842, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(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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TALLAHASSEE, FLORIDA  
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