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(R	equestor's Name)		
(A	ddress)		
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(C	ity/State/Zip/Phone	: #)	
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SECRETARY OF STATE
TALLAHASSEE EI GENE



COVER LETTER

SUBJECT: C + T Fruit Juc. (Name of Corporation)
DOCUMENT NUMBER: PO500000180
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Charles mutter (Name of Person)
C+T Fruit Iuc. (Name of Firm/Company)
P. D. Box 1808 (Address)
Palmetto Fl. 34220 (City/State and Zip Code)
For further information concerning this matter, please call:
Charles Mutter at (941) 723-4300 (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

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, Terri Mutter hereby resign as Socr	eta	xu	
	(Title)	,	•
of C+T Fruit INC. (Name of Corporation)		·	
(Name of Corporation)			
POSOCOO 2180 a corporation organized under the laws of (Document Number, if known)	the Sta	te of	
Florida			
Newi Mitte			
(Signature of resigning officer/director)	_		
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FILING FEE IS \$35.00	TAR	AUG 30	<u> </u>
Make checks payable to Florida Department of State and mail Amendment Section	133. 10 A		FILED
Make checks payable to Florida Department of State and mail	to: ∨ :	₽	
Amondment Section		10:1	
PHICHERICA DOUGH			

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