

PO 5000017646

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

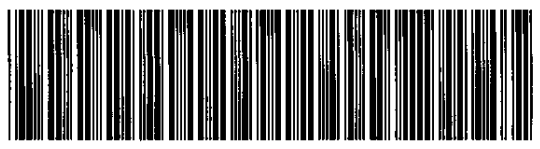
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CAMPROSSI, 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:

MARCO A ROSSIL
(Name of Person)

CAMPROSSI, INC.
(Name of Firm/Company)

409 E. Baker ST.
(Address)

GORDONSVILLE, VA. 22942
(City/State and Zip Code)

For further information concerning this matter, please call:

MARCO ROSSIL at (941) 737-9072
(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, MARCO A ROSSIL, hereby resign as CFO
(Title)

of CAMPROSSI, INC
(Name of Corporation)

PD5000017646, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Marco A Rossil
(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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