POS 000027401

| (Re | equestor's Name) | |
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| (Ac | ldress) | |
| (Ad | dress) | <u></u> |
| (Cit | ty/State/Zip/Phone | #) |
| PICK-UP | WAIT | MAIL |
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| Certified Copies | _ Certificates | of Status |
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SECRETARY OF STATE

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COVER LETTER

CENTRAL FLORIDA ARTIST MANAGEMENT, INC. (Name of Corporation) P05000027401 **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: Angelo Patane (Name of Person) (Name of Firm/Company) 2006 Guava Drive (Address) Edgewater, FL 32141 (City/State and Zip Code) For further information concerning this matter, please call: Angelo Patane (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Street Address:
Amendment Section
Division of Corporations

Mailing Address:

Amendment Section Division of Corporations

Post Office Box 6327 Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| I, ANGELO PATANE | , hereby resign as_ | President and Treasu (Title) | ırer . |
|--|----------------------------------|---------------------------------|---------------------|
| of CENTRAL FLORIDA ARTIST MA | | | , |
| P05000027401 , a (Document Number, if known) | corporation organized un | der the laws of the State | of |
| Florida | | | |
| (Signa | ture of resigning officer/direct | tor) | OS DEC 19 AM 10: 26 |

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