

PO5000058827

(Requestor's Name)

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(City/State/Zip/Phone #)

☐

PICK-UP

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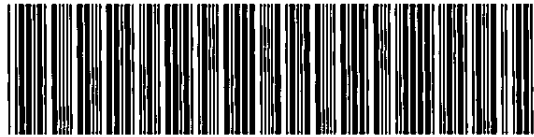
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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500108439645

Resignation
of officer

09/04/07--01003--020 **35.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 SEP -4 PM 3:51

RECEIVED

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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SUFFICIENCY OF FILING

2007 SEP -4 AM 11:16

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9/4/07

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. CCCTV OF FLORIDA CORP

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)

☒ Walk in

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☐ Certified Copy

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☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☒ Amendment
- ☒ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

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OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

2007 SEP -4 PM 3:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, RAMON FERNANDEZ, hereby resign as VP
(Title)

of CCCTV OF FLORIDA CORP
(Name of Corporation)

P05000038827, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Ramon Fernandez
(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