

P05000094374

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

JAN 06 2006

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Cherokee Installation's Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** PD5000094374

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

Please return all correspondence concerning this matter to the following:

Tammy Henderson  
(Name of Person)

Cherokee Installation's Inc.  
(Name of Firm/Company)

822 Jonathan Rd.  
(Address)

Jacksonville, FL. 32234  
(City/State and Zip Code)

For further information concerning this matter, please call:

Tammy Henderson at ( 904 ) 289-4705  
(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, Mark D. Craft, hereby resign as Officer  
(Title)

of Cherokee Installation's Inc.  
(Name of Corporation)

P05000094374, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Mark Craft  
(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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