## P05000109305

| <i>→</i> (F              | Requestor's Name)                       |                 |  |  |  |  |  |
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| 4)                       | Address)                                | •••••           |  |  |  |  |  |
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| (City/State/Zip/Phone #) |   |                 |  |  |  |  |  |
| PICK-UP                  | ☐ WAIT                                  | MAIL            |  |  |  |  |  |
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| (E                       | Business Entity Name)                   |                 |  |  |  |  |  |
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| (Document Number)        |   |                 |  |  |  |  |  |
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## **COVER LETTER**

| TO: Amendment Section Division of Corporations   |
|--|
| SUBJECT: CELEBRATION TRADE CORPORATION (Name of Corporation)                                 |
| DOCUMENT NUMBER: <u>P05000/09305</u>   |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing |
| Please return all correspondence concerning this matter to the following:                    |
| LUIS RODRIGUES (Name of Person)  |
| CELEBRATION TRADE CORPORATION (Name of Firm/Company)   |
| 215 CELEBRATION PLACE # 500 (Address)  |
| CECEBRATION, FL 34747 (City/State and Zip Code)  |
| For further information concerning this matter, please call:                                 |
| DAVID FREEMAN at (32) 250-0451 (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

| l, | DAVID                 | PREE!                    | MAN           | _, hereby re | esign as      | TREA           | (Title)                        | R          |        |
|----|-----------------------|--------------------------|---------------|--------------|---------------|----------------|--------------------------------|------------|--------|
| of | CELE                  | BRATION<br>(Nai          | U TRA         |              | CORP          | ORATI          | 0 N                            |            | ,      |
| P  | O5000 / (Document Num | 09305<br>nber, if known) | , a corpo     | ration orga  | nized unde    | er the laws of | the State                      | of         |        |
| F  | CORIDA                |                          | ·             |              |               |                |                                |            |        |
|    |                       |                          |               |              |               |                |                                |            |        |
|    |                       |                          | (Signature of | 7            | icer/director | r)             | SECRE  <br>TALLAHI             | 07 MA      |        |
|    |                       |                          |               |              |               |                | ARY OF STATE<br>ASSEE, FLORID, | R-2 PH 2:4 | OB711. |

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

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