(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
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COVER LETTER

Division of Corporations
SUBJECT: CLAYATV - COM (Name of Corporation)
DOCUMENT NUMBER: <u>P05000 // 1908</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:
BeiAN GOURLAY (Name of Person)
(Name of Firm/Company)
4055 EDBELAND TRAIL (Address)
MIDDLEBURG, FL, 32068 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (904) 635-9892 (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

Amendment Section

TO:

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, JOSEPH LAPPIN	, hereby resign as OFFIC	CER POPELLOR
CLAY ATV-CO	M FORMERLY RTS INC	(1),10)
(Name	of Corporation)	,
<u>P05000111908</u> (Document Number, if known)	_, a corporation organized under the law	rs of the State of
FLORIDA	_·	
	mature of resigning officer/director)	O6 JUL 17 AM 9: 20 TALLAHASSEE FLORID

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