PO 7000011093

(Re	equestor's Name)	<u> </u>
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Dc	ocument Number)	
Certified Copies		
Special Instructions to	Filing Officer:	

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C.COULLIETTE

FEB 0 3 2011

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: XXX-STREAM TA	CKLE, INC.
SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER: PO	7000011093
The enclosed Officer/Director Res	signation for a Corporation and fee are submitted for filing
Please return all correspondence c	concerning this matter to the following:
JEFFERSON W CRAFT	
(Name of Pe	erson)
CRAFT & COMPANY, CPA'S	, PA
(Name of Firm/C	Company)
6100 NEBRASKA AVENUE	•
(Address	3)
TAMPA, FL 33604	
(City/State and Z	Zip Code)
For further information concerning	g this matter, please call:
JEFFERSON W CRAFT	at (813) 239-1173 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 ma	ade 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

JEFFERSON W CRAFT	, hereby resign as DIRECTOR		
	, hereby resign as (Title)		
of_XXX-STREAM TACKLE, INC		,	
(Nan	ne of Corporation)		
P07000011093 (Document Number, if known)	, a corporation organized under the laws of the State of		
FLORIDA	•		
	(Signature of resigning officer/director)	SECRETAR VISION OF	
	3 PH 2: 0s	Y OF STATE CORPORATION	

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