P07000001792

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700132003687

07/03/08--01033--023 **35.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

My

COVER LETTER

Name of Corporation) **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Firm/Company) 1010e South Futton Drive (Address) Fredericus bur 1/A
(City/State and Zip Code) For further information concerning this matter, please call: Trey 545 at (540) 841-9458 (Area Code & Daytime Telephone Number)

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

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Tallahassee, FL 32314

TO:

Amendment Section **Division of Corporations**

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

ı, <u>Jef</u>	frey B	Sones	, here	by resign as	Presid	ent (Title)	
of Car	holic l	Record L	abe rporation)	Inc.			······ ,
P0700	DO 2(gent Number, if	792, a c	corporation of	organized unde	er the laws of	f the State of	
Flori	da	.		•			
						2008 JUL SECRETA	earent j
		Out	Ly 3.	Joxes		-3 SSE	
		(Signat	are of resignin	g officer/directo	r)	AM IO: 03 OF STATE E. FLORID	Ü

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