P07000096708

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

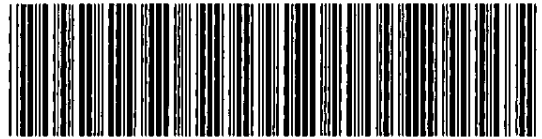☐ PICK-UP   ☐ WAIT   ☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: _CRAvey Enterprises, Inc._
(Name of Corporation)

DOCUMENT NUMBER: _P07000096708_

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

Please return all correspondence concerning this matter to the following:

Shelia Cravey
(Name of Person)

_____
(Name of Firm/Company)

4255 Lavallet Circle
(Address)

Pensacola Fl. 32504
(City/State and Zip Code)

For further information concerning this matter, please call: _850-525-2049_

Shelia Cravey at (_850_) _435-0970_
(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

CR2E044(08/05)

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

I, __Shelia Cravey__ , hereby resign as __Vice President__
                                                         (Title)

of __Cravey Enterprises, Inc.__ ,
         (Name of Corporation)

__PO7000096708__ , a corporation organized under the laws of the State of

(Document Number, if known)

_____ .

__Shelia Cravey__
(Signature of resigning officer/director)

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TALLAHASSEE, FLORIDA

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