

PO8000019433

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

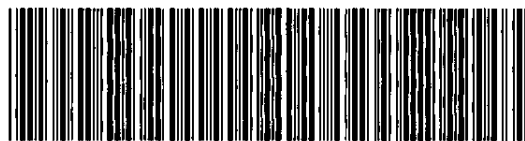
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01/25  
5/1/09  
W

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Caron Direct. Com  
(Name of Corporation)

**DOCUMENT NUMBER:** PO 8000019433

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

Please return all correspondence concerning this matter to the following:

SHARON S ROBINSON  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

112 PEPPER TREE CT.  
(Address)

ROYAL PALM BEACH FL 33411  
(City/State and Zip Code)

For further information concerning this matter, please call:

Sharon Robinson at (561) 792-0501  
(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

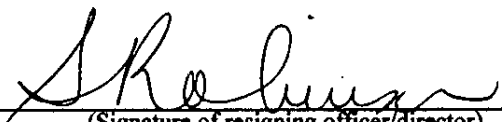
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Sharon S Robinson, hereby resign as Senior Vice President  
(Title)

of Caron Direct. Com Inc.  
(Name of Corporation)

P08000019433, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida.

  
(Signature of resigning officer/director)

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SECRETARY OF STATE  
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