(Requ	estor's Name)	
(Addre	ess)	.
(Addre	ess)	
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COVER LETTER

Division of Corporations
SUBJECT: C & F SECURITY, INC (Name of Corporation)
DOCUMENT NUMBER: P09000006016
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JAMES D. NOBLE
(Name of Person)
(Name of Firm/Company)
(Name of Firm/Company) 2227 SOUTHWEST 54TH LANE Charge to 1524 NW Zuth Pl. (Address) CAPE CORAL, FL 33914 (City/State and Zip Code)
(Address)
CAPE CORAL, FL 33914 Cape Coral H1. 33773
(City/State and Zip Code)
For further information concerning this matter, please call:
JAMES D. NOBLE 239 540-4792
JAMES D. NOBLE at (239) 540-4792 (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 Smalling Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314
And Drop Jox as he has Resigned
thank you

CR2E044(08/05)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Ī.	JOSEPH M. BUSHNELL	, hereby resign as VICE PRESIDENT
-, -		(Title)
C & F SECURITY, INC (Name of Corporation) P0900006016		RITY, INC
		poration)
		orporation organized under the laws of the State of
	FLORIDA	

Signature of resigning officer/director)

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 00 MAR 30 AM 11: 40

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SECRETARY OF STATE
DIVISION OF COMPORATION