

P09000079954

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

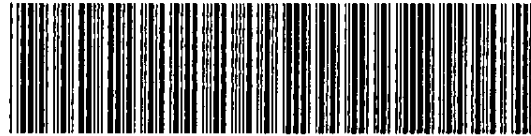
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
ALABAMA

O/D Resign.

2-9-11

DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: C & L SECURING, INC.
(Name of Corporation)

DOCUMENT NUMBER: P09000079954

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

Please return all correspondence concerning this matter to the following:

JOHN F. CRAWFORD

(Name of Person)

C & L SECURING, INC.

(Name of Firm/Company)

4044 NW 216TH TERRACE

(Address)

LAWTEY, FL. 32058

(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN F. CRAWFORD

(Name of Person)

at (

904

)

219-8963

(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

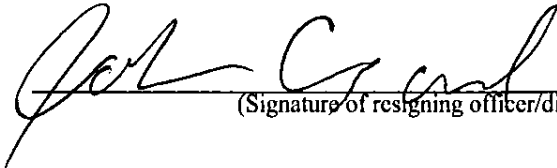
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, JOHN F. CRAWFORD, hereby resign as PRES., TREAS AND DIRECTOR
(Title)

of C & L SECURING, INC.
(Name of Corporation)

P09000079954, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

SECRETARY OF STATE
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 08-03-2010 BY 60322

11 FEB -7 AM 11:02

FILED

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