15-P1000008420

(Pa	questor's Name)	
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(Ad	dress)	
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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SECRETARY OF SIATIONS
DIVISION OF CORPORATIONS



COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Legacy Television N	Network, Inc
,	(Name of Corporation)
DOCUMENT NUMBER: P100	000008420
The enclosed Officer/Director Resignation	gnation for a Corporation and fee are submitted for filing.
Please return all correspondence co	ncerning this matter to the following:
F.S. Winsett	
(Name of Pers	son)
(Name of Firm/Co	omnany)
(Mane of This co	·
402 N Carolina Ave	
(Address)	**************************************
Palm Harbor, FL 34683	
(City/State and Zi	p Code)
For further information concerning	this matter, please call:
F.S. Winsett	at (727) 487-3409 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 mad	e 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, F.S. Winsett	, hereby resign as_	Chairman	
		(Title)	
of Legacy Television Netw	vork, Inc		
	(Name of Corporation)	,	
P10000008420	, a corporation organized un	, a corporation organized under the laws of the State of	
(Document Number, if known	n)		
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