## P10000056589

(Requestor's Name)			
. (Address)			
(Address)			
(City/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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C.COULLIETTE

MAR 0.1 2011

**EXAMINER** 

## **COVER LETTER**

Division of Corporations
SUBJECT: THE SA CARAVELLE CORPORATION (Name of Corporation)
DOCUMENT NUMBER: P10000056589
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
CHAUNCY RICHARD (Name of Person)
(Name of Firm/Company)
750 S. MAIN ST 15071 (Address)
KELLER TX 76218 (City/State and Zip Code)
For further information concerning this matter, please call:
ALAUN W RICHARD at (817 ) 9939 (8) (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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, GIAUNG RICHARD	_, hereby resign as <u>しに</u> と	PRESIDENT #
		(Title)
		• •
OF THE CARAVELLE CORPORATION	)	
(Name of Corporat	ion)	
(Document Number, if known), a corpo	ration organized under the l	aws of the State of
FLORIDA.		
		•
Craw-Freierch (Signature of	resigning officer/director)	11 FEB 25
		25 AM/1:08
FILING F	EE IS \$35.00	08

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314