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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: CCLL ONE, INC.
(Name of Corporation)
DOCUMENT NUMBER: P12000071206
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LUIS G RODRIGUEZ
(Name of Person)
CCLL ONE, INC.
(Name of Firm/Company)
3546 ST. JOHNS BLUFF RD. SUITE 103
(Address)
JACKSONVILLE, FL 32224
(City/State and Zip Code)
For further information concerning this matter, please call:
LUIS G ROGRIGUEZ at (904) 234-8435
LUIS G ROGRIGUEZ at (904) 234-8435 (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, CRISTIAN G RODRIGUEZ	, hereby resign as_	SECRETARY		
<u> </u>	, noroby rusign us_	(Title)		_
of CCLL ONE, INC.				. 1
(Name of Corporation P12000071206, a corporation, a corporation	ration organized ur	der the laws of the	e State of	
FLORIDA				
(Signafure of	C resigning officer/direc	etor)	ZIIZ OCT -1 PM 2: 0	

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