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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL .
(Bu	siness Entity Nar	me)
(Do	cument Number)	_
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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AUG 0 7 2014 C. CARROTHERS

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: 1 Allen Rods Inc. (Name of Corporation)
DOCUMENT NUMBER:
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Tooo O Weather (Name of Person)
T Allen Rocks Inc (Name of Firm/Company)
9378 Arlington Expressivay Suite 313
Jack sonville Florida 32225 (City/State and Zip Code)
For further information concerning this matter, please call:
Terry Sturgeon at (904) 376-5686 (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
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E044 (05/13)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, TODO O weatherly, hereby resign as Vice President	_
of TAllen Rocks Inc (Name of Corporation)	,
, a corporation organized under the laws of the State of (Document Number, if known)	
 •	
(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