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	PICK-UP	WAIT	MAIL
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Certified Co	pies	Certificates	s of Status
Special In	structions to	Filing Officer:	

Office Use Only



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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Central Florida Packaging Inc
(Name of Corporation)
DOCUMENT NUMBER: P170000 83/17
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Charles Parker
(Name of Person) Central Florida Packagn Inc. (Name of Firm/Company)
(Name of Firm/Company)
102 F. Now Heven Ave. Suite 22) (Address)
Melbuine FL 3290/ (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (407) 777-6850 (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassec, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Charles Parker , hereby resign as President
of Central Florida Packaging Inc.
(Name of Corporation)
21700083117 , a corporation organized under the laws of the State of
(Document Number, if known)
(Signature of resigning officer/director)
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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