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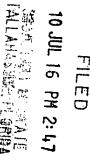
: (Requ	estor's Name)	
(Address)		
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(City/s	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

Amendment Section Division of Corporations

TO:

. All Travel & Cruise	Center Inc	
SUBJECT: All Travel & Cruise Center, Inc. (Name of Corporation)		
DOCUMENT NUMBER:		
The enclosed Officer/Director Res	ignation for a Corporation and fee are submitted for filing	
Please return all correspondence co	oncerning this matter to the following:	
Diann Sullivan		
(Name of Per	rson)	
All Travel & Cruise Center, Inc).	
(Name of Firm/C	ompany)	
5614 N. River Shore Dr.		
(Address)	
Tampa, Fl 33603		
(City/State and Z	ip Code)	
For further information concerning	g this matter, please call:	
Diann Sullivan	at (813) 600-0807	
(Name of Person)	at (813) 600-0807 (Area Code & Daytime Telephone Number)	
Enclosed is a check for \$35.00 ma	de 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

Russell Falor	, hereby resign as President
7	(Title)
of All Travel & Cruise Center, Inc(Name of Cor	poration)
	corporation organized under the laws of the State of
Florida	the district of the second of
Securel /	TO JUL 16 PM 2: 4: The 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