298000066379

(Req	uestor's Name)	
·		
bbA)	ress)	
// A ala	ress)	
(Add	(655)	
(City.	/State/Zip/Phone	→#)
	·	•
PICK-UP	MAIT WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
}		
		1
		}
		j
1		}
}		

Office Use Only



500060733375

10/21/05--01020--004 **35.00

SUMBLE OF STATE

1. Shivers

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Corporate Liquidators, Inc.		
(Name of Corporation)		
DOCUMENT NUMBER: P98000006379		
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Roland D. Waller (Name of Person)		
Waller, Mitchell & Barnett (Name of Firm/Company)		
5332 Main Street (Address)		
New Port Richey, FL 34652 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Pamela Aiello at (727) 847-2288 (Name of Person) (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.		
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

Jilanne Belcher	, hereby resign as P, S, T, & D
7	(Title)
of Corporate Liquidators, Inc.	and the second of the second o
(Name o	of Corporation)
P9800006379 (Document Number, if known)	_, a corporation organized under the laws of the State of
(Document Number, it known)	
Florida	

(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 2 0C.L.51 Ve IU: