P990000046573 Kara Cameron PO BOX 2153 Gainesville, Pr. 32601

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

(Corporation Name)	(Document #) 300034153335 -10/05/00-01089-017 *****35.00 *****35.00	
2(Corporation Name)	(Document #)	
(Corporation Name)	(Document #)	
4. (Corporation Name) Walk in Pick up time	(Document #) Certified Copy C	•
Mail out Will wait NEW FILINGS	Photocopy Certificate of Statells AMENDMENTS	
 □ Profit □ Not for Profit □ Limited Liability □ Domestication □ Other 	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	-
OTHER FILINGS	REGISTRATION/QUALIFICATION	
☐ Annual Report ☐ Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement	
	☐ Trademark ☐ Other TRADIUN OCT Examinar's Initials	····
	Evaminer's Initials	



OFFICER / DIRECTOR RESIGNATION

Ι,	Kara Cameron , hereby resign as Officer/Director (Title)
of	Credit Assistance Company, Inc. (Name of Corporation)
a cor	poration organized under the laws of the State of Florida _
and a	affirm that the corporation has been notified in writing of the resignation.
	(Signature of resigning officer/director)

FILING FEE IS \$35.00