

P99000072746

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

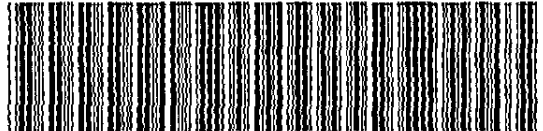
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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G. Coultette MAR 15 2006

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CC. DESTINATIONS CORP.
(Name of Corporation)

DOCUMENT NUMBER: P99000072746

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

CYNTHIA SERRALTA
(Name of Person)

CC. DESTINATIONS
(Name of Firm/Company)

16546 NE 26. Av. Apt 2-I
(Address)

Miami FL 33160
(City/State and Zip Code)

For further information concerning this matter, please call:

CYNTHIA SERRALTA at (786) 285-3305
(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

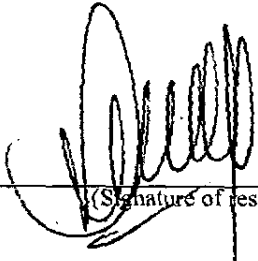
Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Cynthia Screalita, hereby resign as VPSD
(Title)

of CC. Destinations, Corp.
(Name of Corporation)

P99000072746, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA


(Signature of resigning officer/director)

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TALLAHASSEE, FLORIDA

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