equestor's Name)	
idress)	
ddress)	
ty/State/Zip/Phone	e #)
WAIT	MAIL
usiness Entity Nar	me)
ocument Number)	
Certificates	s of Status
Special Instructions to Filing Officer:	
	ddress) ty/State/Zip/Phone WAIT usiness Entity Nar coument Number)

Office Use Only



900279418499

11/24/15--01026--002 **227.50

NOV 30 2015

R. Within

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: RIDE-AWAY, INC.	
(Name of Corporation)	
DOCUMENT NUMBER: F0900000636	
The enclosed Officer/Director Resignation for a Corporation and fee are submit	ted for filing
Please return all correspondence concerning this matter to the following:	
STEPHANIE PELLETIER	
(Name of Person)	
RIDE-AWAY, INC.	
(Name of Firm/Company)	
54 WENTWORTH AVE	
(Address)	
LONDONDERRY, NH 03053	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
STEPHANIE PELLETIER at (603)552-5538	
(Name of Person) (Area Code & Daytime Telepho	ne 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
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

HAL COMPTON	, hereby resign as CEO	
	(Title)	
RIDE-AWAY, INC.	,	
·	f Corporation)	
F0900000636 (Document Number, if known)	, a corporation organized under the laws of the State of	
DELAWARE		
(Si	gnature of resigning officer/director) SECRETARY OF ALLAHASSEE	Haller St. Common of the Commo

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