

P11000108180

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

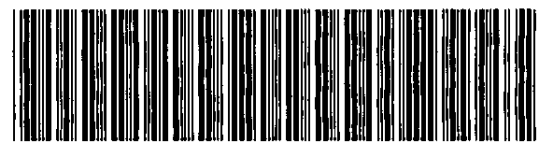
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200260750002

06/02/14--01054--015 **105.00

FILED
SECRETARY OF STATE
14 JUN -2 PM 4:29

ADRES
ca 6.11.14

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AARONSON VAN LINES, INC.
(Name of Corporation)

DOCUMENT NUMBER: P11000108180

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PETER AARONSON

(Name of Person)

AARONSON VAN LINES, INC.

(Name of Firm/Company)

600 W. PROSPECT RD., STE 2

(Address)

OAKLAND PARK, FL 33309

(City/State and Zip Code)

For further information concerning this matter, please call:

PETER AARONSON at **954 815-2395**

(Name of Person)

(Area Code & Daytime Telephone 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**

I, Benjamin Aaronson, hereby resign as President
(Title)

of Aaronson Van Lines, Inc.
(Name of Corporation)

PT1000108180, a corporation organized under the laws of the State of
(Document Number, if 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

FILED
DEPT. OF STATE
14 JUN -2 PM 1:37