

P160000094666

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

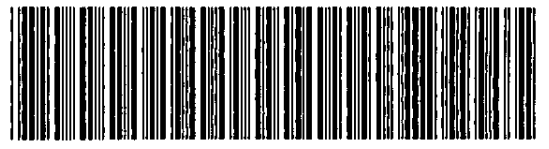
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Mathews Bus Alliance, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P16000094666

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 G. Crider, Esq.
(Name of Person)

BOYETTE CUMMINS & NAILOS PLLC
(Name of Firm/Company)

1635 East Highway 50, Suite 300
(Address)

CLERMONT, FL 34711
(City/State and Zip Code)

For further information concerning this matter, please call:

Cynthia G. Crider, Esq. at (352) 394-2103
(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
409 E. Gaines Street
Tallahassee, FL 32399

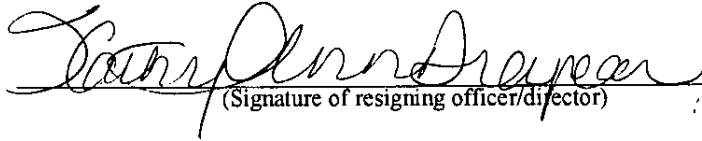
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Kathy A. Drapeau, hereby resign as Treasurer (Title)

of Matthews Bus Alliance, Inc. (Name of Corporation)

P16000094666, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.


(Signature of resigning officer/director)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 APR -6 AM 10:00

FILED

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