980099036

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
	Office Use Only	180)
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2009 DEC 17 PH 12: 59
SECRETARY OF STATE

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

LUZ C STAINES	, hereby resign as SECRETARY	
",	_, nereey resign as	(Title)
ofTAMPA SHIP SERVICE CORP.		
(Name of Corporat	ion)	
P98000099036 , a corpo	oration organized under the l	aws of the State of
FLORIDA .	•	
Signature of	resigning officer director)	7909 DEC 17 PH 12: 5 SECHETARY OF STATE TALLAHASSEE, FLORIT

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

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: TAMPA SHIP SE	RVICE CORP.
SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER: P	98000099036
The enclosed Officer/Director R	esignation for a Corporation and fee are submitted for filing
Please return all correspondence	concerning this matter to the following:
FROILAN STAINES	
(Name of I	Person)
TAMPA SHIP SERVICE CO	RP.
(Name of Firm	(Company)
210 SOUTH 12TH STREET	
(Addre	ss)
TAMPA, FL 33602	
(City/State and	Zip Code)
For further information concerni	ng this matter, please call:
FROILAN STAINES	at (813) 748-3331
(Name of Person)	at (<u>813</u>) 748-3331 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 n	nade 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