391391

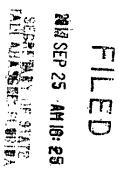
(Requestor's Name)		
(Address)	
(Address)	
	City/State/Zip/Phone #)	
PICK-UP	MAIL MAIL	
(Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		





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09/25/17--01003--021 **105.00



CDRES

SEP 2 6 2017
I ALBRITTON

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

_{I.} Donna McBride	, hereby resign as Vice President
	(Title)
of MCB OIL COMPAN	IY
(Name of C	Corporation)
397397	, 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

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