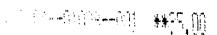
## F0200003890

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	· · · · · · · · · · · · · · · · · · ·
,   PICK-L	JP 🔲 WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of	Status
Special Instruction	ns to Filing Officer:	

Office Use Only



300041555833



O4 OCT 19 AH 9: 05

3 10/25 fox

## TRANSMITTAL LETTER

SUBJECT: HOPKINS RIDES INC. (Name of Corporation)
DOCUMENT NUMBER: F02 000003890
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JEFFREY C. DAVIS (Name of Person)
(Name of Firm/Company)
4889 PLANTATION TRAIL (Address)
CHIPLEY FL 33438-4491 (City/State and Zip Code)
For further information concerning this matter, please call:
TEFFREY C. DAVIS at (850) 636-400 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

04 OCT 19 AM 9: 05
ALLAHASSEE, FLORIDA

I, JEFFREY C. DAVIS, hereby resign as VICE PRESIDENT, DIRECTOR (Title)

of HOPKINS RIDES, TNC DY PORCLE (Title),

(Name of Corporation)

FOR 000003890, a corporation organized under the laws of the State of (Document Number, if known)

NEW HAMPSHIRE.

(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