(Re	equestor's Name)	
(Ad	ddress)	
. (Ad	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		,

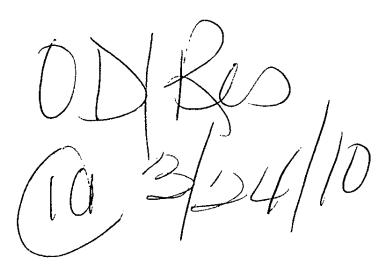
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: H Tran Solutions Corp
DOCUMENT NUMBER: FO 800060 2779
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
H Jan Solvhons Corp
(Name of Firm/Company) 45 (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
(Nyame of Person) at (Area Code & Daytime Telephone Number)
(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

CR2E044(08/05)

617-204-1000 Pilled

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Anthony Jace his hereby resign as Vice Isels dell
of A / Fran 150/4 hon5 (DP). (Name of Corporation)
FO TOOOOO 2779 a corporation organized under the laws of the State of (Document Number, if known)
MA
(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

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