H50933

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SECRETARY OF STATE ORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: SHORELINE SERVICES, INC.	
(Name of Corporation)	
DOCUMENT NUMBER: H50933	
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for	iling
Please return all correspondence concerning this matter to the following:	
KATHY E. EMERY	
(Name of Person)	
(Name of Firm/Company)	
- 4	
8020 N.E. 4 Avenue	
(Address)	
Miami, FL 33138	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
KATHY E. EMERY at (305) 758-8310 (Name of Person) (Area Code & Daytime Telephone Numb	
(Name of Person) (Area Code & Daytime Telephone Numb	er)
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	

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	KATHY E.	EMERY	MERY , hereby resig		as President/Director	
-					(Title)	
of	SHORELINE	SERVICES,	INC.,			
			(Name of Corporatio	u)	<i>*************************************</i>	
H.	50933		. a comon	stion organized un	der the laws of the State of	
	(Document N	umber, if known	3 0 00 00			
PI	LORIDA					

KATHY E. EMERY

SECRETARY OF STAT ALLAHASSEE, FLORI

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