

J28577

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

[Handwritten signatures]

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: T. Carreno Fill Hawks, Inc.
(Name of Corporation)

DOCUMENT NUMBER: _____

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cheryl Carreno
(Name of Person)

Carreno Fill Hawks, Inc
(Name of Firm/Company)

6002 Duque Rd
(Address)

Lutz, Florida 33549
(City/State and Zip Code)

For further information concerning this matter, please call:

Cheryl Carreno at (813) 948-0312
(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Cheryl Carreno, hereby resign as Sec-Lreas
(Title)

of Carreno Full Haulers
(Name of Corporation)

528577
(Document Number, if known), a corporation organized under the laws of the State of

Florida

Cheryl Carreno
(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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