

N03173

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700249481047

07/11/13--01012--034 **35.00

FILED
SECRETARY OF STATE
13 JUL 11 AM 8:37

DD/Res
@ 7.15.13

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Holiday Isles Marine Training And Rescue Group INC
(Name of Corporation)

DOCUMENT NUMBER: 1103173

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

Please return all correspondence concerning this matter to the following:

Marcel M Traficante

(Name of Person)

(Name of Firm/Company)

PO Box 10202

(Address)

Largo, Florida 33773

(City/State and Zip Code)

For further information concerning this matter, please call:

Marcel M Traficante at **(727) 482-6204**
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

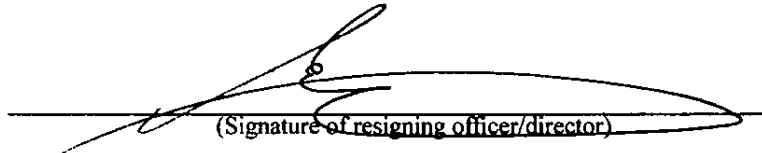
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Marcel M Traficante, hereby resign as Board Member
(Title)

of Holiday Isles Marine Training and Rescue Group, INC.
(Name of Corporation)

NO3173, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

FILED
SECRETARY OF STATE
JAN 10 11 AM 8:37
13 2011

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