P02000105979

(Re	equestor's Name)	
(Ac	idress)	
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(Ĉi	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Eu	siness Entity Nar	me)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Vara Trucking, IHC (Name of Corporation)
DOCUMENT NUMBER: PO2000105979
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Victor Manuel Riveroi (Name of Person)
Name of Firm/Company)
4000 Compensor Blad. (Address)
Tampa, FL 33617 (City/State and Zip Code)
For further information concerning this matter, please call:
VICTOR M. RIVETO at (347) 724-9677 (Name of Person) at (347) 724-9677 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399
Please forward any correspondence to
P.O.BOX 292262 Tampa, FL 33687-2262
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OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, VICTOF F	Manuel Ri-	HETO, hereby resign a	s Presid	(Title)	
of Vara	Truckin (Name of	Corporation)			
PO2000 (Document Num	0105979 lber, if known)	, a corporation organized t	ınder the laws of	f the State of	
Flonde	<u> </u>			超 5	
				JA 20 ORETHS	
-	Mit Sign	mature of resigning officer/dir	ector)	HIO: 52	S Speed

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

Please fortiard any correspondence to: P.O. 100x 292262 Tampa, FL 336872202