PO 300 008 1204

(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:





500037930855

06/18/04--01023--009 **35.00

OL JUN 18 AM 9: 26
ALLAHASSEE, FLORID





TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations
SUB	JECT: Asphalt Management Company
	(Name of Corporation)
DOC	UMENT NUMBER: P03000081204
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please	e return all correspondence concerning this matter to the following:
Uta	Ake
	(Name of Person)
Asp	halt Management Company
	(Name of Firm/Company)
P.O	. Box 3235
	(Address)
Spri	ng Hill, FL 34611
	(City/State and Zip Code)
For fi	urther information concerning this matter, please call:
Uta /	at (302) 307 0180
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	sed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divisi P.O. I	ng Address: Indiment Section Individual Section Individual Section Indianation of Corporations Indianation of Corporation of Corporations Indianation of Corporation of Corporation of Corporation of Corporation of C

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED

04 JUN 18 AM 9: 26

ALLAHASSEE FLORIDA

• •
on organized under the laws of the State of

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