

PO3000086973

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

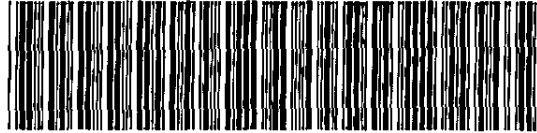
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400058433274

10/11/05--01025--003 **35.00

FILED
05 AUG 11 PM 12:46
CLERK OF COURT
TALLAHASSEE, FLORIDA

off

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: G.O.B. TRANSPORT, INC.

(Name of Corporation)

DOCUMENT NUMBER:

P030000 86973

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

Please return all correspondence concerning this matter to the following:

SARAH JEAN MOSLEY

(Name of Person)

G.O.B. TRANSPORT, INC.

(Name of Firm/Company)

2050 S. PINE BARREN ROAD

(Address)

MCDAVID ; FL ; 32568

(City/State and Zip Code)

For further information concerning this matter, please call:

SARAH JEAN MOSLEY

(Name of Person)

at (850) 256-1029

(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
409 E. Gaines Street
Tallahassee, FL 32399

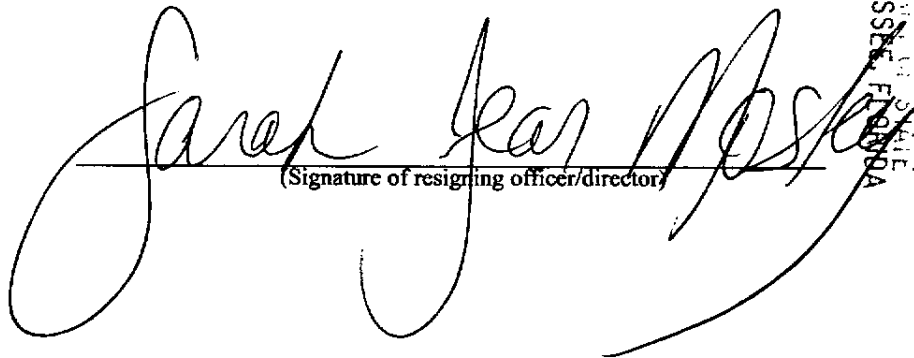
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, SARAH JEAN MOSLEY, hereby resign as PRESIDENT
(Title)

of G.O.B. TRANSPORT INC.
(Name of Corporation)

P03000086973, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

05 AUG 11 PM 12:46

FILED

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