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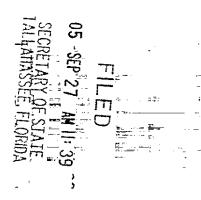
(Re	equestor's Name)	
(Address)		
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(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
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Certified Copies Certificates of Status		of Status
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COVER LETTER

Division of Corporations
SUBJECT: Denlers TRANSPORT INC. (Name of Corporation)
DOCUMENT NUMBER: P03000/09084
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
David Durbance (Name of Person)
Dealers TRANSPORT INC (Name of Firm/Company)
1650 E. Welch Rd (Address)
Popta, E/ 387/2 (City/State and Zip Code)
For further information concerning this matter, please call:
David Durk Aare at (407) 947-1541 (Name of Person) at (407) 947-1541 (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

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Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION I, LINDAD, DURRANCE, hereby resign as Vice President / Theas of Dealers Transport Lac. (Name of Corporation) POSCOLO 1084 (Name of Corporation) Occurrent Number, if known)

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