P0400050398

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(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:	7
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OBFEB -4 PM 3: 29
SECRETARY OF STATE TALLAHASSEE, FLORIDA

Officer Resgn Crin murphy 2/4/08

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Transfreight Corporation DOCUMENT NUMBER: PO400050398
DOCUMENT NUMBER: РОЧОСОБОЗ 98
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Leif E Johnson (Name of Person)
(Name of Firm/Company)
2901 NW 48 Ave Ap+ # 258 (Address)
Lauderdale Lakes FC 33313 (City/State and Zip Code)
For further information concerning this matter, please call:
Leif E Johnson at (957) 733-5170 (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 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 3231

CR2E044(08/05)

2661 Executive Center Circle Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, Leif E Johnson	, hereby resign as Director (Title)
of Transfreight Corporation	nation.
Poloo50398, a corpo (Document Number, if known)	ration organized under the laws of the State of
Florida.	
(Signature of	PILED 08 FEB - L PM 3: 29 IALLAHASSEE, FLORIDA resigning officer/director)
	(A)

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