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04, OCT 20 PM 2: 35



## TRANSMITTAL LETTER

SUBJECT: KAI Logistics INC (Name of Corporation)
DOCUMENT NUMBER: PO 400071448
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Ruber J Fack (Name of Person)
(Name of Firm/Company)
10501 MIN 50 57 5te 105 (Address)
Samuel State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (954) 70/-6043  (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 409 E. Gaines Street Tallahassee, FL 32399

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED
04 OCT 20 PM 2: 36
PF STATE
FLORIDA

<b>-</b> /	NO.
I, Steven FACK, hereby resign as_	(Title)
of KAI Logistius INC (Name of Corporation)	,
Po 40 000 7/448, a corporation organized und	der the laws of the State of
(Signature of resigning officer/director	or)

## 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