## P04000117269

•
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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SECKETARY OF STATE

Officer Resignation

TB 5-6-08

## **COVER LETTER**

TO: . Amendment Section
Division of Corporations

SÜBJEC	T: TAXI LOBO INC (Name of Corporation)
DOCUM	ENT NUMBER: p04000117269
The enclo	sed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please ret	urn all correspondence concerning this matter to the following:
	AGAPITO CONZALEZ (Name of Person)
	(Name of Person)
	TAXI LOBO, INC
is the	(Name of Firm/Company)
	303 WELLINGTON AVE
. Fred	(Address)
_	LEHIGH ACRES FL 33936
	(City/State and Zip Code)
For furthe	r information concerning this matter, please call:
	ANDREW J HIGGINBOTHAM at (863) 675–3903 (Name of Person) (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

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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



Ĩ, _	JUAN M RODRIGUEZ	, hereby resign as	PRESIDENT			
, —			(Title)			
κ <u>)</u>						
of	TAXI LOBO, INC.					
	(Name of Corporation)					
	P 04000117269	, a corporation organized un	der the laws of the State of			
	(Document Number, if known)	, ,				
	FLORIDA					

(Signature of fesigning 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