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(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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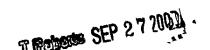


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COVER LETTER

10.		n of Corporation	ns	-		
SUBJ	ECT:	ROMAN	MOTOR	LINES,	INC.	
	ECT: ROMAN MOTOR LINES, INC. (Name of Corporation)					
DOC	JMENT	NUMBER:	PO5000	069008		
The er	nclosed (Officer/Director	Resignation for	r a Corporatior	and fee are submitted for filing	
Please	return a	ll corresponden	ce concerning t	his matter to th	e following:	
J	OSE	ROMAN (Name o			•	
\mathcal{R}	OMAI	V MOTO	R LINES	, INC.		
		-	•			
15	<u> 5155</u>	SW 73	2 COURT	<u> </u>		
M	11AM	City/State a	33 <i>15</i> 8			
		(City/State a	nd Zip Code)		•	
For fu	rther inf	ormation concer	ming this matte	er, please call:		
J	OSE 1	ROMAN		_{at (} <i>3</i> 05	252 - 4986 e & Daytime Telephone Number)	
		(Name of Perso	n)	(Area Cod	e & Daytime Telephone Number)	
Enclo	sed is a	check for \$35.00) made payable	to the Florida	Department of State.	
Divisi Clifto 2661	dent S dent S on of Co n Buildin Executive nassee, F	ection proporations or Center Circle L 32301	A mend	g Address: ment Section n of Corporatio fice Box 6327 ssee, FL 32314	ns 4	

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I JAY A. ROMAN	, hereby resign as	VICETRESIDENT
	,	(Title)
of ROMAN MOTOR		
P050000 6900 8	e of Corporation)	
(Document Number, if known)	, a corporation organized und	der the laws of the State of
FLORIDA	·	

(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