

(Re	equestor's Name)			
(Ad	ldress)	· · ·		
(Ac	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bı	siness Entity Nar	ne)		
	_			
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			

Office Use Only



500315312185

07/03/18--01017--013 **35.00

FILED

19 JUN 29 AM 9 21

01020

R. WHITE JUL 0 6 2018

TRANSMITTAL LETTER

SUBJECT: RYE EXPRESS LUGISTICS CORP (Name of Corporation)
DOCUMENT NUMBER: <u>P 050000924444</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
TOA C OVIES (Name of Person)
TOA C OVIES CPA PA (Name of Firm/Company)
3785 NW 32 ANE # 302 (Address)
DORAL /2 33 166 (City/State and Zip Code)
For further information concerning this matter, please call:
TOA C OVIES at (30.5) 47.7 5.798 (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
2661 Executive Center Circle
Tallahassee, FL 32301

Amendment Section Division of Corporations

TO:

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Ι,	LUCRECIA LINDEMANN, hereby resign as SECRETAR (Title)	⊘ /		
of	RYE FXPRESS LOGISTICS CORP. (Name of Corporation)		<u>_</u> ,	
	To50000 924444 , a corporation organized under the laws of the Stat (Document Number, if known)	te of		
	FLORIDA			
	(Signature of resigning officer/director)			
	\mathcal{O}		18 JUN 29	-11
	FILING FEE IS \$35.00		M & 21	O

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314