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PO5000/29586

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

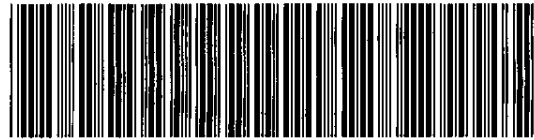
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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O/D Resign.

11/23/10

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** J. W. Hoyle Trucking, Inc.

(Name of Corporation)

**DOCUMENT NUMBER:**

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jared W. Hoyle

(Name of Person)

J. W. Hoyle Trucking, Inc.

(Name of Firm/Company)

415 Blue Ridge Street

(Address)

Hendersonville, NC 28792

(City/State and Zip Code)

For further information concerning this matter, please call:

Jared W. Hoyle

(Name of Person)

at ( 828 ) 694-3856

(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**

I, Jared W. Hoyle, hereby resign as President and Director  
(Title)

of J. W. Hoyle Trucking, Inc.  
(Name of Corporation)

, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

Jared W. Hoyle  
(Signature of resigning officer/director)

10 NOV 18 AM 11:37  
FILED

**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