

PO5000156450

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

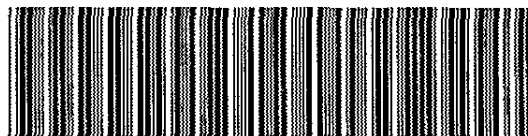
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** TRU-Line Construction of Southwest Florida, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** POS000156450

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

Please return all correspondence concerning this matter to the following:

MARIANNE C. BELYSKI  
(Name of Person)

TRU-LINE Construction of S.W. Fl., Inc.  
(Name of Firm/Company)

P.O. Box 7742  
(Address)

Northport, FL 34287  
(City/State and Zip Code)

For further information concerning this matter, please call:

MARIANNE C. Belyski at (941) 426-9130  
(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

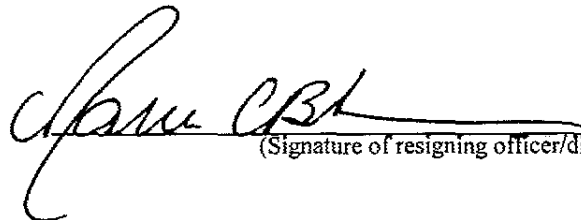
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Marganne C. Belyski, hereby resign as Director  
(Title)

of TRU-LINE Construction of S.W. Fl, Inc  
(Name of Corporation)

PO5000156450, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

**FILED**  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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