

P06000056462

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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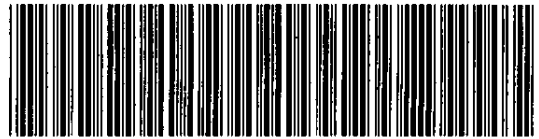
(Business Entity Name)

(Document Number)

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DIVISION OF STATE
OPERATIONS

2 Roberts NOV 03 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: L.E.I. TRANSPORT, INC.
(Name of Corporation)

DOCUMENT NUMBER: P06000056462

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

Please return all correspondence concerning this matter to the following:

LUIS COSTALES
(Name of Person)

L.E.I. TRANSPORT INC
(Name of Firm/Company)

2860 OLD CANOE CREEK RD
(Address)

SAINT CLOUD, FL 34772
(City/State and Zip Code)

For further information concerning this matter, please call:

LUIS COSTALES at (407) 873-4830
(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**

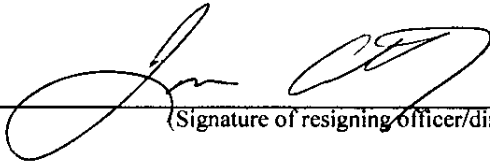
FILED
DEPT. OF STATE
DIVISION OF CORPORATIONS
09 NOV -2 AM 9:02

I, JOSE L. CANDELARIO, hereby resign as PRESIDENT
(Title)

of L.E.I. TRANSPORT, INC.
(Name of Corporation)

P06000056462, a corporation organized under the laws of the State of
(Document Number, if known)

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