POLODOD 59508

(Re	equestor's Name)	
	·	
(Ac	ldress)	
		,
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL .
(Bu	isiness Entity Nar	me)
_	·	
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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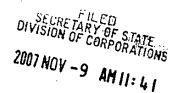
COVER LETTER

SUBJECT: Jenkins Towing & Recovery	, Inc.
SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER: P060000595	508
The enclosed Officer/Director Resignation for	or a Corporation and fee are submitted for filing.
Please return all correspondence concerning	this matter to the following:
James D. Jenkins	
(Name of Person)	
Jenkins Towing & Recovery, Inc.	
(Name of Firm/Company)	
576 Neptune Street	
(Address)	
West Palm Beach, FL 33406	
(City/State and Zip Code)	
For further information concerning this matt	er, please call:
James D. Jenkins	at (561) 687-1726 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable	e to the Florida Department of State.
Amendment Section Amend Division of Corporations Division Clifton Building Post O	g Address: ment Section on of Corporations ffice Box 6327 assee, FL 32314

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



Robert M. Martin	, hereby resign as Vice-President
⁻⁷ 7	(Title)
of Jenkins Towing & Recovery, I	
(Name	e of Corporation)
P06000059508 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	
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$\mathcal{D}.I.$	Marte

FILING FEE IS \$35.00

(Signature of resigning officer/director)

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

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314