000007044

· (Re	equestor's Name)	
	·	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone) #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filina Officer:	
-		
		1

Office Use Only



100086699531

16/42/07 - 01003--012 **35.00

COVER LETTER

Bernardini & Sons Trucking, Inc. (Name of Corporation) P06000070444 **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: Myriam Bernardini (Name of Person) Bernardini & Sons Trucking, Inc. (Name of Firm/Company) PO Box 2071 (Address) Interlachen, FL 32148 (City/State and Zip Code) For further information concerning this matter, please call: Myriam Bernardini (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

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Mailing Address:

Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Jose J. Bernardini, Sr.	hereby resign as Treasurer (Title)
of Bernardini & Sons truc	
P06000070444 (Document Number, If know	, a corporation organized under the laws of the State of
Florida	
Jose	Denardini Se (Signature of resigning officer/director) ALL AFFE STATE 9: 24

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