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(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·
	 	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
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(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TQ: Amendment Section Division of Corporations
SUBJECT: Y. A. L. Trucking Inc. (Name of Gorporation)
DOCUMENT NUMBER: <u>P060000 72815</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Luisa Olson (Name of Person)
(Name of Firm/Company)
7231 Sw. 142 Ave (Address)
Miami FL 38183 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (305) 812-0053 (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 OCT | | AM | 1:52 FOR A CORPORATION

I, Luisa Olson , hereby resign as Vice Bresident	,
(Title)	
of Y.A.L. Trocking Inc. (Name of Corporation)	··· ,
^	
(Document Number, if known), a corporation organized under the laws of the State of	
Florida	
Lusa Olson	
(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