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PICK-UP WAIT MAIL								
(Business Entity Name)								
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Special Instructions to Filing Officer:								





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TALL AHASSSEE, FIORELY

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

DOCUMENT NUMBER: 4060 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: KV CARRIER SERVICES 9657 NW South River Dr # 1 Medley EL 33166 (Name 305) 883-6262)

(Address)

(City/State and Zip Code)

For further information cokeyn GARRIER SERVICES

9657 NW South River Dr # /

Medley FL 33166

(Name of Person) (305) 883-6262 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

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of <u></u>	due	Line	QUFO (Name o	Tvoh f Corporation	sport,	II,	<u>.                                    </u>			,
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		de	Contract of the second	gnature of rec	signing officer/	directo	r)	F STATE	PM 3: 51	Ö

## 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