

PO6000 119376

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: XTREME Hauling INC.
(Name of Corporation)

DOCUMENT NUMBER: PO6000119376

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

Please return all correspondence concerning this matter to the following:

MIKE RUFF

(Name of Person)

XTREME Hauling INC.

(Name of Firm/Company)

2209 COLLIER PKWY.

(Address)

Land-O-Lakes FLA - 34639

(City/State and Zip Code)

For further information concerning this matter, please call:

John Pina

(Name of Person)

at (727) 849-3713
(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**

I, John Pina, hereby resign as Secretary,
XTREME
of ~~XTREME~~ Handling INC.
(Name of Corporation)

PO6000119376, a corporation organized under the laws of the State of _____
(Document Number, if known)
Florida

John Pina 6-30-00
(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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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