## 100000156253

(Re	equestor's Name)	
. <b>(A</b> d	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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TAT LAHASSEE, FLORID

## TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporation	ons
SUBJ	ECT:_ Tampa Safety	Solutions Corp.
		(Name of Corporation)
DOC	UMENT NUMBER:_	P06000156253
The ea	nclosed Officer/Directo	r Resignation for a Corporation and fee are submitted for filing
Please	return all corresponder	nce concerning this matter to the following:
Gera	aldine R. Holloway, E	squire
	(Name	of Person)
	(Name of F	irm/Company)
P. O	. Box 151783	
	(Ad	dress)
Tam	pa, FL 33684	
	(City/State	and Zip Code)
For fu	rther information conce	rning this matter, please call:
Gerai	ldine R. Holloway	at ( 813 ) 238-8839 (Area Code & Daytime Telephone Number)
	(Name of Perso	(Area Code & Daytime Telephone Number)
Enclos	sed is a check for \$35.0	0 made payable to the Florida Department of State.
Ameno Divisio P.O. B	ng Address: dment Section on of Corporations lox 6327 assee, FL 32314	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

TO:

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Kevin M. Mullis	, hereby resign as VSTD (all offices)
	(Title)
of Tampa Safety Solutions Corp	).
	e of Corporation)
P06000156253 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	······································
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## 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