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resignation & officer

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COVER LETTER

SUBJECT: Tactical Edge Protection Services, INC. (Name of Corporation)
DOCUMENT NUMBER: <u>PO7000007.368</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:
Medardo UJeda (Name of Person) Tactical Edge Protection Services, Inc. (Name of Firm/Company)
255 EAST Flagler Street suites 84/85 (Address)
minn', Kurida 33/3/ (City/State and Zip Code)
For further information concerning this matter, please call:

MEdardo OJ Edu (Name of Person) at (305) 505-33-59 (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

Amendment Section Division of Corporations

TO:

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, <u>Medardo UJeda</u> , her	eby resign as (D) Officer (Title)
of TACTICAL Edge Protection 56 (Name of Corporation)	rvices, INC.
POTOGO OT368, a corporation (Document Number, if known)	organized under the laws of the State of AUG 21
	AM 11: 55 SEE, FLORID
Signature of resign	Şir Si

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