PDDDDDDDD777

(Re	questor's Name)	<u>-</u> <u>-</u>
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	9 #)
(Bu	siness Entity Nan	ne)
(Dc	ocument Number)	
ertified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		,
	Office Use On	



03/25/08--01051--012 **35.00





COVER LETTER

TO: Amendment Section Division of Corporations

0`

SUNCOAST Elevator (Onpany Unc (Name of Corporation) SUBJECT: P07 00002073 **DOCUMENT NUMBER:**

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

Please return all correspondence concerning this matter to the following:

) COAST Etwatol Company) N. 93Rd LANE (Address) Fl. 33478 (City/State and Zip Code)

For further information concerning this matter, please call:

at (<u>561</u>) <u>743-3/64</u> (Area Code & Daytime Telephone Number) -auis M. Alanez (Name of Person

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, LOUIS M. AWAKEZ, hereby resign as_ (Title) Swicoast Elevator (Name of Corporation) ('ompany PAC. <u>P07000020727</u> (Document Number, if known) ____, a corporation organized under the laws of the State of borida

08 MAR 25 AM 8: (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