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-	(Requestor's Na	ame)
	(Address)	
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	(City/State/Zip/F	Phone #)
		,
PICK-U	P WAIT	T MAIL
	(Business Entity	/ Name)
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Certified Copies	Certific	cates of Status
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Special Instruction	s to Filing Officer	r:
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officer Resignation
TB 7/16/08

Hello Hes: Darhu

I spoke to you on July 9th /2008 on the Phone, I Send my imformation to you so You can take my name and information OUT of the System. I officially Resign my Corporation

cell phone 407-2355318

Yeng Much A Juen? My Mail Super Place
My Maddrew Corlando Florida 32837

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: RECYCLE & Shredded Disposal JAIC (Name of Corporation) DOCUMENT NUMBER: P07000082756
DOCUMENT NUMBER: 701000082756
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Gloria PANCARL (Name of Person)
(Name of Ferson)
<u> </u>
(Name of Firm/Company)
4041 VIOSCA PLACE (Address)
ORLando, Florida 32837 (City/State and Zip Code)
For further information concerning this matter, please call:
Gloizia Pancari at 401 2355318 (Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

CR2E044(08/05)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION ALCORPORATION ALCORPORATION
I, GIORIA PANCARI , hereby resign as PRESIDENTISA (Title)
of RECYCLE & ShREddEd TIRES DISPOSAL, INC. (Name of Corporation)
P0700082756, a corporation organized under the laws of the State of (Document Number, if known)
FLORIDA.

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