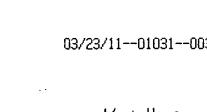
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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K.Waller

## **COVER LETTER**

TO:	Amendment Section
	Division of Corporations

SUBJECT: Olympian Truck Rental and Leasing, Inc.
(Name of Corporation)

DOCUMENT NUMBER: POS DOOD 2749

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

Please return all correspondence concerning this matter to the following:

(Name of Person)

OLYMPIAN TEUCK RENTAL PLEASING, INC. 1123 CROWN PARK CIRCLE WINTER GARDEN, FL 34787

— (City/State and Zip Code)

For further information concerning this matter, please call:

Uames Fischer at (321) 440 9774

(Name of Person) (Area Code & Daytime Telephone Number)

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

Street Address:

Amendment Section
Division of Corporations
Glifton Building
2661 Executive Center Circle
Tallallassee, Fi 32301

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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 3, 2011

SYLVIA ROUNTREE OLYMPIAN TRUCK RENTAL & LEASING 1123 CROWN PARK CIRCLE WINTER PARK, FL 34787

SUBJECT: OLYMPIAN TRUCK RENTAL AND LEASING, INC.

Ref. Number: P08000002749

We have received your document for OLYMPIAN TRUCK RENTAL AND LEASING, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The fee to resign as officer/director for a corporation is \$35 per person resigning.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson Document Specialist Supervisor

Letter Number: 811A00005224

RETARY OF STATE AHASSEE, FLORIDA

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

of Olympian Truck Rental and Wasing, Inc.

(Name of Corporation)

P08000002749. a corporation organized under the laws of the State of

(Document Number, if known)

(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