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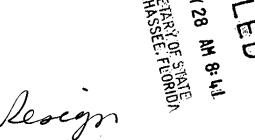
(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #)
(Address) (City/State/Zip/Phone #)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Juan M. Towing, Inc. (Name of Corporation)
DOCUMENT NUMBER: POSOOOO 21088
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)
Juan M. Towing Inc (Name of Firm/Company)
G714 Atlanta St. (Address)
Hollywood, fc. 33024 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (786) 624 - 0114 (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 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION 2008 MAY 28 AM 8: 4/1

I, Juan M. Giron	, hereby resign as(Title)
of Juan M. Towing	Tnc Corporation)
(Document Number, if known)	a corporation organized under the laws of the State of
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