P800058623

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

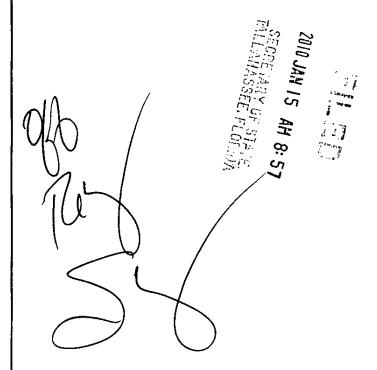
Office Use Only

1/9,10



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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: P+S 6REEL TRADING, Inc. (Name of Corporation)
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:
Sharon Licamara (Name of Person)
(Name of Firm/Company)
349 VALLEY FORGE PD (Address)
West Product Pd (Address) West Product, FC 33405 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (561) 662-5300 (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 FOR A CORPORATION

0)	itle) ,
(Name of Corporation)	 ,
20800058623 , a corporation organized under the laws of the	
(Document Number, if known)	State of
Flut da	
	2
(Signature of resigning officer/director)	SECRETARY
	AM 8: 57

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