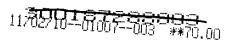
## P10000053939

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	<del>9</del> #)
PICK-UP	☐ WAIT	MAIL
<u>.</u> (Bu	siness Entity Nan	ne)
· (Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



300187288883



SECRETABLY OF STAT TALLAHASSEE, FLORII

Off Resujor There

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: htegreted Wash Transportation)  Name of Corporation)  DOCUMENT NUMBER: P1000005 39 39
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LiSa Pellecchia (Name of Person)
- (Name of Firm/Company)
2161 NE 64th Street
(Address)  For + LaudMddl M 33308  (City/State and Zip Code)
For further information concerning this matter, please call:
Moms body at 56 C36 USG (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

FILED

2010 NOV -2 P 1: 57
I, Lisa felucchia, hereby resign as VIQ PROGRAME STATE (Title)
of Inligitated Waste Transportation Spervices Iran (Name of Corporation)
(Document Number, if known), a corporation organized under the laws of the State of
florida.
A

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