

P110000010277

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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MAIL

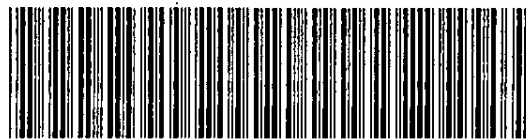
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 MAR 11 PM 1:26

OD/RES
@ 3/14/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Coastal Auto Carriers Inc.
(Name of Corporation)

DOCUMENT NUMBER: P 11000010277

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

Please return all correspondence concerning this matter to the following:

Juan C Pons
(Name of Person)

~~E~~
(Name of Firm/Company)

8 Setucket Rd
(Address)

Yarmouth port MA 02675
(City/State and Zip Code)

For further information concerning this matter, please call:

Juan C. Pons at (508) 566-4891
(Name of Person) (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**

I, Juan C. Pons, hereby resign as Treasurer / Secretary
(Title)

of Coastal Auto Carriers Inc.
(Name of Corporation)

P11000010277, 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

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