P11000040786

(Re	equestor's Name)	
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates o	f Status
Special Instructions to Filing Officer:		

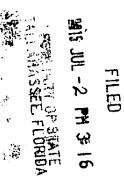




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resignation.

07/02/15--01014--008 **35.00



A RAMSEY

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT. CARGO RISK CORPORATION

(Name of Corporation)

DOCUMENT NUMBER: P11000040786

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 CARLOS MARTINEZ

(Name of Person)

(Name of Firm/Company)

701 BRICKELL AVENUE #1550

(Address)

MIAMI, FL 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

JUAN CARLOS MARTINEZ ... 305 ... 433-6342

(Name of Person)

(Area Code & Daytime Telephone Number)

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

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 **Street Address:**

Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED

2015 JUL -2 PH 3: 16

I, GABRIEL MARTINEZ, h	ereby resign as SECRETARY
of CARGO RISK CORPORA (Name of Corporation)	FION .
P11000040786, a corporation of the corporatio	on organized under the laws of the State of
FLORIDA (Signature of Pesi	gning 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