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(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
(Business Entity Name)					
(Document Number)					
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SECPETARY OF STATL DIVISION OF CORPORATIONS 12 MAR - 2 AM II: 52

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## **COVER LETTER**

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TO: Amendment Section Division of Corporations

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SUBJECT:	Premier	Pro	LOGISTICS	INC.
		(Name o	of Corporation)	r+
DOCUMENT NUMB	BER: $\mathcal{P}$ //(t	00107	840	

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

Please return all correspondence concerning this matter to the following:

Lonez Logistics inc NCompany) MIEr NW 36 AVE (Address)

MIGM, PL 33142 (City/State and Zip Code)

For further information concerning this matter, please call:

<u>(Name of Person)</u> at (<u>786</u>) <u>247 - 3339</u> (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

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OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION	
I, <u>PEOR Pilepsz</u> , hereby resign as <u>Presid</u>	dent (Title)
of <u>Premier</u> Pro Cogistics (Name of Corporation)	,
(Document Number, if known) florida	the State of
A-3-	- , 9
(Signature of resigning officer/director)	VISIEN DE COM
FILING FEE IS \$35.00	AMIL: 52

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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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