

P12000031070

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

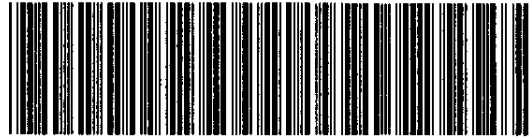
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600271315276

04/03/15--01017--006 **95.00

RECEIVED
DIVISION OF CORPORATIONS
15 APR - 3 PM 2:36

C.L.
4-8-15

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MASTER TRAILER RENTAL, 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:

ROBERT A. BLACK

(Name of Person)

MASTER TRAILER RENTAL, INC

(Name of Firm/Company)

1255 HILL AVENUE

(Address)

WEST PALM BEACH, FL 33407

(City/State and Zip Code)

For further information concerning this matter, please call:

ROBERT BLACK

(Name of Person)

at (**561**) **214-2091**

(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
SECRETARY OF STATE
DIVISION OF CORPORATIONS

15 APR -3 PM 2:36

I, AFOO SHAJAHAN, hereby resign as V.P.
(Title)

of MASTER TRAILER RENTAL, INC
(Name of Corporation)

P12000031070, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

D. Afo.
(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