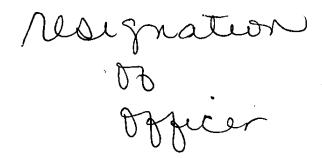
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TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Safe Carrier Compliance Inc. (Name of Corporation)
DOCUMENT NUMBER: P 120 000 65742
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
amparo I galquera (Name of Person)
Safe Carrier Compliance Inc (Name of Firm/Company)
17780 NW 167 Jarrace (Address) Hiami Lakes F/ 33014 (City/State and Zip Code)
For further information concerning this matter, please call: Ampuro I Palavero at (305) 300 - 343+ (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

Amendment Section

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION FEB - 6 AM | | | | 9

SECRETARY OF STATE TALLAHASSEE, FLORIDA

1 D	LOMBA		
I, amparo I galquera, hereby resign as VP			
	Title)		
of Safe Carrier Compliace Inc	<u> </u>		
(Name of Corporation)			
(Document Number, if known), a corporation organized under the laws of the	ne State of		
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