P140000065757

(Requ	uestor's Name)	
(Addi	ess)	
(Addi	ess)	
(City/	State/Zip/Phone	: #)
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TRANSMITTAL LETTER

SUBJECT: Odom Brothers Transportation, Inc. (Name of Corporation) DOCUMENT NUMBER: P14000045757
DOCUMENT NUMBER: 1 140000 42 12 1
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Lila Octom (Name of Person)
(Name of Firm/Company)
2370 Lake Drive NW
Winter Haven FL 33881 (City/State and Zip C6de)
For further information concerning this matter, please call:
Lila Odom at (803) 8003321. (Name of Person) at (803) 8003321. (Area Code & Daytime Telephone Number)

TO:

Amendment Section **Division of Corporations**

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

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

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Lila Odom , hereby resign as OFFicer (Title)
of Odom Brothers Transportation, Inc. (Name of Corporation)
P14000065757, 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