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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

COACH TOURS, INC. SUBJECT:

(Name of Corporation)

DOCUMENT NUMBER: P15000026093

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

Please return all correspondence concerning this matter to the following:

OLEG CHERNOBRODSKY

(Name of Person)

(Name of Firm/Company)

16850 COLLINS AVENUE, STE. 259

(Address)

SUNNY ISLES BEACH, FLORIDA 33160

(City/State and Zip Code)

For further information concerning this matter, please call:

OLEG CHERNOBRODSKY (Name of Person) at (954 914-6159 (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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

AILEEN CABANAS	PRESIDENT AND DIRECTOR
l,	, hereby resign as
	(Title)
COACH TOURS, INC.	
of	
	(Name of Corporation)
P15000026093	
115000020075	, a corporation organized under the laws of the State of
(Document Number, if kno	Jwn)
FLORIDA	

(Signature of resigning officer/director)	• • •		2024 SEP 12	FIL
FILING FEE IS \$35.00	1 2 5 0 11	у	PH 12: 35	ΕD

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314