

P15000044263

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

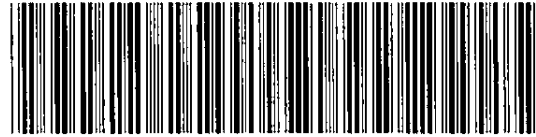
(Business Entity Name)

(Document Number)

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JUL 10 2017

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DELTA FORCE MOTORS INC
(Name of Corporation)

DOCUMENT NUMBER: P 15000044263

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

Please return all correspondence concerning this matter to the following:

T Amara Coleman
(Name of Person)

(Name of Firm/Company)

21218 ST. ANDREWS BLVD 655
(Address)

SEA RAYON, FL. 33433
(City/State and Zip Code)

For further information concerning this matter, please call:

TAMARA Coleman at (561) 389-4713
(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

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

2017 JUL -5 AM 10:38
RECEIVED
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FLORIDA DEPARTMENT OF STATE

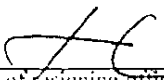
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, TAMARA COLEMAN, hereby resign as Vice President
(Title)

of DELTA FORCE MARINE, INC.
(Name of Corporation)

P 15000044263, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

FILED
DIVISION OF CORPORATIONS
2017 JUL -5 AM 10:38

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