

P20000023944

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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☐

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(Business Entity Name)

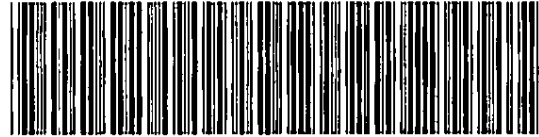
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TALLAHASSEE, FL

old Resignation

MAR 08 2023

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

Total Logistics Services, Inc.

SUBJECT: _____
(Name of Corporation)

P20000023944

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:

Lourdes Nunez, Esquire

(Name of Person)

Lourdes Nunez & Associates, PA

(Name of Firm/Company)

1839 SW 27 Avenue

(Address)

Miami, Florida 33145

(City/State and Zip Code)

For further information concerning this matter, please call:

Lourdes Nunez 305 984-9347

(Name of Person) at (_____) _____
(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

SECRETARY OF STATE
TALLAHASSEE, FL

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**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

Lilian Uribe Becar DVST
I, _____, hereby resign as _____
(Title)

Total Logistics Services, Inc.
of _____
(Name of Corporation)

P200000023944

_____, 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:

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