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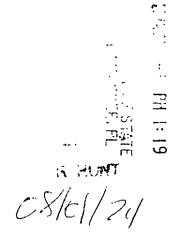
(Requestor's Name)		
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PICK-UP WAIT MAIL		
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Four Saints lagistics Frac (Name of Corporation)	<u>-</u>
DOCUMENT NUMBER: \$210000 31362	
The enclosed Officer/Director Resignation for a Corporation and fee ar	e submitted for filing.
Please return all correspondence concerning this matter to the following	g:
Name of Person) Four Sainte Cercitice Free (Name of Firm/Company) 425 NC 22nd St (Address) City/State and Zip Code)	CANAL STANSFELFI
For further information concerning this matter, please call:	िस ७
Testin Fortund at (305) 345 (Name of Person) at (Area Code & Daytime	
Enclosed is a check for \$35.00 made payable to the Florida Departmen	t 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

I	AR (Title)
of Four Saints Confirme Two	,
121000031362 a corporation organized under (Document Number, if known)	r the laws of the State of
_ Floricla	
	- Pro- 7
(Spendiure of resigning officer/director	14.3350.16 11.18 11.18

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