

P96000091782

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900066117029

02/21/06--01034--024 **35.00

FILED

06 FEB 21 PM 2:51

SECRETARY OF STATE
TALLAHASSEE FLORIDA

00

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RESIGN POWER SHUTTLE INC :
(Name of Corporation)

DOCUMENT NUMBER: P 96 0000 91782

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

Please return all correspondence concerning this matter to the following:

JOSEPH GEDEON
(Name of Person)

POWER SHUTTLE INC
(Name of Firm/Company)

12611 N E 12 AVE # 6
(Address)

N M BEACH FL, 33162
(City/State and Zip Code)

For further information concerning this matter, please call:

JOSEPH GEDEON at (786) 626-1706
(Name of Person) (Area Code & Daytime Telephone Number)

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

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

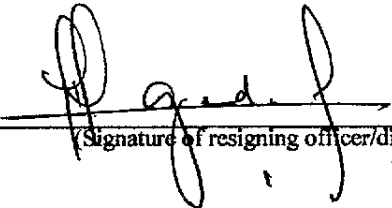
Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, JOSEPH GEDEON, hereby resign as PRESIDENT
(Title)

of POWER SHUTTLE, INC.
(Name of Corporation)

P 96000091782, 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

FILED
06 FEB 21 PM 2:51
SECRETARY OF STATE
TALLAHASSEE FLORIDA