PAWWYAZE,

(Re	equestor's Name)	
(Ac	dress)	
(Ac	ldress)	
(Cit	ly/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

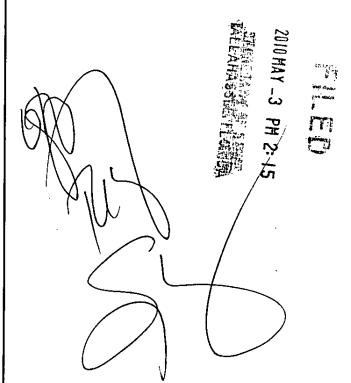
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COVER LETTER

SUBJECT: TELASURE COAST BARGE, INC. (Name of Corporation)
(Name of Corporation)
DOCUMENT NUMBER: P970000 42756
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
SAZYATOLL JULIANO, JR. (Name of Person)
(Name of Firm/Company)
1200 CUT OFF ROAD (Address)
STUNET FLORIDA 34994 (City/State and Zip Code)
For further information concerning this matter, please call:
SAZVATORE JULIMO, JR. at (772) 220-3625 (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

Amendment Section Division of Corporations

TO:

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

LUCY JULIANO	, hereby resign	as PRES 12	(Title)	_
TREASURE CONST	SARGE, _	INC	,	,
D 97000 42 756 , a co	orporation organized	under the laws of	the State of	
FLORIDA				
Lucy Je	uhano			
(Signatur	re of resigning officer/di	rector)	2010 HAY	
FILIN	G FEE IS \$35.00		-3 PM 2	į

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

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