Requestor's Name Address City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 800002510148---8 -05/04/98--01115--013 *****35.00 *****35.00 (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) Certified Copy Pick up time Walk in Certificate of Status ☐ Photocopy ☐ Will wait Mail out AMENDMENTS NEW FILINGS Amendment Profit Officer/Director Resignation of R.A NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other OTHER FILINGS

Annual Report
Fictitious Name
Name Reservation

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
Trademark
Other

Examiner's Initials



Florida Department of State, Jim Smith, Secretary of State

AFFIDAVIT OF RESIGNATION OF OFFICER AND/OR DIRECTOR

Florida Department of State, Jim Smith, Secretary of State	
AFFIDAVIT OF RESIGNATION OF OFFICER AND/OR DIRECTOR	
STATE OFFlorida	
COUNTY OF Miami-Dade	
Luis Alonzo Morales after being duly swom, state that to the best of my	
I,after being duly swom, state that to the best of the lowing is true and knowledge, information and belief, and under the penalties of perjury, the following is true and correct:	
Luis Alonzo Morales , hereby resign as (Title)	
Green Cold Storage Corporation , a Florida corporation;	
(Name of Corporation)	
That the corporation has been notified in writing of the resignation.	
Jan Marie Ma	
Signature of resigning officer/director	
Sworn to and subscribed before me this	.2
My Commission Expires: My Commission Expires: OFFICE APR. 26,1999	

FILING FEE IS \$35.00