P9800019193

(Re	equestor's Name)	
(Ad	idress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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(00	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

Division of Corporations	
SUBJECT: Treasure Coast Loading Inc.	
(Name of Corporation)	
DOCUMENT NUMBER: P98000019193	
The enclosed Officer/Director Resignation for a Corporation and fee are submitted	ed for filing
Please return all correspondence concerning this matter to the following:	
Abel G Garcia	
(Name of Person)	
Treasure Coast Loading Inc	
(Name of Firm/Company)	
3171 SE Aster Lane Apt 1102	
(Address)	
Stuart FI 34997	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Abel G Garcia 772 260-1916	
Abel G Garcia at (772) 260-1916 (Area Code & Daytime Telephone	e 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

Liliana Garcia	, hereby resign as Vice-President		
-,	(Title)		
of_ Treasure Coast Loading In	C,		
(N	ame of Corporation)		
P98000019193 (Document Number, if known)	, a corporation organized under the laws of the State of		
Florida			
Xili	SECRETARY OF STATE (Signature of resigning officer/director) SECRETARY OF STATE (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