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LAZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

3320 S.W. 87th AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

FILED
00 APR -3 PM 1:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. BLUE LIGHTNING TRANSPORT INC.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

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☐ Certified Copy

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certificate of Status

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input checked="" type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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*****35.00 *****35.00

Examiner's Initials

POB

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RESIGNATION OF OFFICER AND DIRECTOR
AFFIDAVIT

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

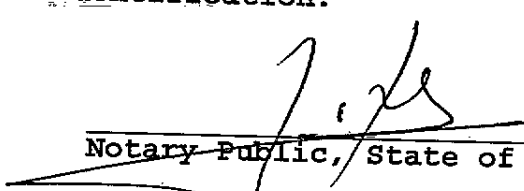
BEFORE ME, the undersigned authority, personally appeared,
ROSALBA FLORES, who upon being first duly sworn, says the
following:

1. That I, ROSALBA FLORES, have resigned as President of
BLUE LIGHTNING TRANSPORT INC., a Florida Corporation.
2. That the corporation has been notified in writing of the
resignation.

FURTHER AFFIANT SAYETH NAUGHT.


ROSALBA FLORES

Sworn to and subscribed before me this 20 day of MARCH, 2000.
The undersigned notary public specifies tha affiant's signature
is the signature being notarized and that affiant personally
appeared before the notary at the time of notarization. Affiant
is personally know or has furnished
F-462-720-67-888-6 as identification.


Notary Public, State of Florida

My Commission Expires:



Jorge R. Lopez
Commission # CE 796914
Expires NOV. 15, 2002
BONDED THRU
ATLANTIC BONDING CO., INC.