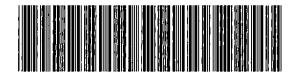
P98000106531

(Requestor's Name)
·
(Address)
(Address)
. (City/State/Zip/Phone #)
.PICK-UP WAIT MAIL
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COVER LETTER

	ndment Section ion of Corporations	
SUBJECT:	Family Transport Inc	
_		(Name of Corporation)
DOCUMEN	T NUMBER: P980	00106531
The enclosed	Officer/Director Resign	nation for a Corporation and fee are submitted for filing
Please return	all correspondence con	cerning this matter to the following:
Michele Cr	abtree	
	(Name of Perso	on)
Family Tra	nsport Inc	
	(Name of Firm/Con	npany)
P.O. Box 2		
	(Address)	
Apopka, Fl	. 32704	•
	(City/State and Zip	Code)
For further in	formation concerning the	his matter, please call:
Michele Cra		at (407) 880-2622 (Area Code & Daytime Telephone Number)
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a	check for \$35.00 made	payable to the Florida Department of State.
Street Addre Amendment : Division of C Clifton Build 2661 Executi Tallahassee, I	Section Torporations ing ve Center Circle	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Larry Crabtree	, hereby resign as VP
7	(Title)
of Family Transport, Inc .	
(Name of	Corporation)
P98000106531 (Document Number, if known)	a corporation organized under the laws of the State of
Florida	SECRETARY OF STATE TALLAHASSEE, FLORIDA Nature 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