~P990000069928

(Re	equestor's Name)	
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(Ad	ldress)	
(Cit	ty/State/Zip/Phone	÷#)
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COVER LETTER

Resignation of Officer / Director (Name of Corporation) P99000069928 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Roger May (Name of Person) **Dusty's Trucking** (Name of Firm/Company) 1108 Arlanie Rd (Address) Brooksville, Florida. 34604 (City/State and Zip Code) For further information concerning this matter, please call: Roger May 352 799-6600 (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Street Address: **Mailing Address:** Amendment Section Amendment Section Division of Corporations Post Office Box 6327 Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

_{I.} Mary May	, hereby resign as	Director	
"		(Title)	
of Dusty's Trucking, INC.			
(Name of Corp	oration)		
P99000069928, a co	orporation organized under t	he laws of the State of	
Florida			

(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

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