G32891

(Requestor's Name)			
(Ad	dress)		
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(City/State/Zip/Phone #)			
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☐ PICK-UP	☐ WAIT	☐ MAIL	
(Business Entity Name)			
(Document Number)			
(50	cument Number)		
Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer		
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROYES AND FILED



ogg Resign

C. Coulliotte OCT 1 5 2007

COVER LETTER

SUBJECT: TOWY 5 AUTO REPARS TW

(Name of Corporation)

DOCUMENT NUMBER: G32891

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

DR. JEHREY S. COHEW

(Name of Firm/Company)

2790 W. BROWARD BLVD

(Address)

FT LAWDERDALE FL 33312

(City/State and Zip Code)

For further information concerning this matter, please call:

DR. JEHREY S. COHEW

(Name of Person)

at (954) 581-1408

(Area Code & Daytime Telephone 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

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, ANTHONY MIG		PRESIDENT/DIRECTOR
of TONYS AUTO	REPAIRS, INC	(Thue)
(Na	ame of Corporation)	·,
(Document Number, if known)	, a corporation organized under	er the 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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APPROVI