

P01000043629

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

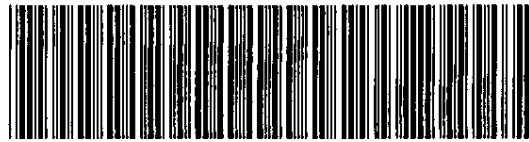
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TALLAHASSEE, FLORIDA

dated  
11/29

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DISSOLUTION

**DOCUMENT NUMBER:** PO 1,0000 43629

The enclosed ~~Articles of Dissolution~~ OLD FEE and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Emelina BODDEN  
(Name of Contact Person)

CÉLAUTO SALES, INC  
(Firm/Company)

5904 NW 93 TER  
(Address)

TAMARAC FL 33321  
(City/State and Zip Code)

For further information concerning this matter, please call:

Emelina BODDEN at (954) 678-7746  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35 Filing Fee     \$43.75 Filing Fee & Certificate of Status     \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)     \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**MAILING ADDRESS:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, NORKA URRIBARRI, hereby resign as president-owner  
(Title)

of CEI AUTO SALES, INC  
(Name of Corporation)

PO 1000043629, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

Norka Urribarr  
(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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STATE OF FLORIDA

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