Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6380

Account Name : THORPE'S CONSULTING SYSTEMS, INC.

Account Number: 120050000069

Phone R WHITE

: (407)352-8514 : (407)540-9620 Fax Number

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LTHORPE&CFL. RR. Com

COR AMND/RESTATE/CORRECT OR O/D RESIGN #1 UNIVERSAL AUTO SALES CORP.

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: #1 UNIVERSAL AUTO SALES CORP.

(Name of Corporation)

DOCUMENT NUMBER: P02000112895

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LYSANDER THORPE

(Name of Person)

THORPE'S CONSULTING SYSTEMS, INC

(Name of Firm/Company)

6327 PINEY GLEN LANE

(Address)

ORLANDO, FL 32819

(City/State and Zip Code)

For further information concerning this matter, please call:

LYSANDER THORPE

(Name of Person)

at (407) 352-8514

(Name of Person)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

_{1,} EFNER JEAN-BAF	PTISTE, hereby resign as PRESIDENT
_{of} #1 UNIVERSAL A	UTO SALES CORP.
P02000112895 (Document Number, if known)	ne of Corporation), a corporation organized under the laws of the State of
FLORIDA	· · · · · · · · · · · · · · · · · · ·
V) and Selection	
The state of the s	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