P06000115115

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	isin ess Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



900091819019

03/09/07--01027--001 **35.00

TILED
OTHAR-9 PH 3: 00
TÄLÄHÄSSEE, FLÖRID

ca ala a a man bilish

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Emanuel Largaespada Auto Repair, Inc (Name of Corporation)
DOCUMENT NUMBER: POGOGOOII5115
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Edwin Largaespada (Name of Person)
(Name of Firm/Company)
2265 NW 21 Terr (Address)
Miami FL 33142 (City/State and Zip Code)
For further information concerning this matter, please call:
Clardia Derivet at (786) 217-4265 (Name of Person) (Area Code & Daytime Telephone Number)

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

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327

Tallahassee, FL 32314

CR2E044(08/05)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED

OFFICER / DIRECTOR RESIGNATION MAR -9 PM 3: 00 FOR A CORPORATION TALLAHASSET STATE

1. Alexander Zuleta, hereby resign as Vice President
(Title)
of Emanuel Largaespada Auto Repair, Inc. (Name of Corporation)
(Name of Corporation)
PO600/15/15 a corporation organized under the laws of the State of (Document Number, if known)
Florida

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