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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT M	AIL
(Business Entity Name)	
(Document Number)	 -
,	
Certified Copies Certificates of Status _	
Special Instructions to Filing Officer:	İ
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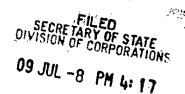
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COVER LETTER

Division of Corporations	
SUBJECT: NPG TIRE INC	
(Name of Corporation)	_
DOCUMENT NUMBER: P08000089987	-
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for fili	ing.
Please return all correspondence concerning this matter to the following:	
NORMAN M PORRAS	
(Name of Person)	
N P G TIRE INC	
(Name of Firm/Company)	
53 1/2 SW 8TH ST	
(Address)	
HOMESTEAD, FL 33030	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
NORMAN M PORRAS (Name of Person) at (786) 838-9331 (Area Code & Daytime Telephone Number	
(Name of Person) (Area Code & Daytime Telephone Number	r)
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	

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



I Patricia ZELEDON	, hereby resign as PRESIDENT
-7	(Title)
of NPGTIRE INC	
	e of Corporation)
P08000089987 (Document Number, if known)	, a corporation organized under the laws of the State of
FLORIDA	
\times	7-2-09
73 // 0	(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