## P040000 71294

| (Requestor's Name)                      |
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| (Address)                               |
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| (Address)                               |
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| (0) 100 1 7 (0)                         |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
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| (Business Entity Name)                  |
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| Special Instructions to Filing Officer: |
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SECRETARY OF STATE

APPROVED AND FILED



## **COVER LETTER**

**Division of Corporations** ·SUBJECT: SURIPARTS CORP (Name of Corporation) 20-1147054 . DOCUMENT NUMBER: The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RAFAEL FALCON (Name of Person) **SURIPARTS** (Name of Firm/Company) 11463 NW 34 STREET (Address) DORAL / FLORIDA / 33178 (City/State and Zip Code) For further information concerning this matter, please call: **RAFAEL FALCON** (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Street Address:
Amendment Section Mailing Address: Amendment Section Division of Corporations **Division of Corporations** Clifton Building Post Office Box 6327 2661 Executive Center Circle Tallahassee, FL 32301 Tallahassee, FL 32314

TO:

**Amendment Section** 

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| I. ALEJANDRO ALVAREZ                     | , hereby resign as VICE - PRESIDENT                    |
|--|--|
|  | (Title)  |
| of_ SURIPARTS CORP                       |  |
| (Name of                                 | Corporation)   |
| P04000071294 (Document Number, if known) | a corporation organized under the laws of the State of |
| FLORIDA                                  | nature of recipring 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 APPICUYED
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