

PO4000138457

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

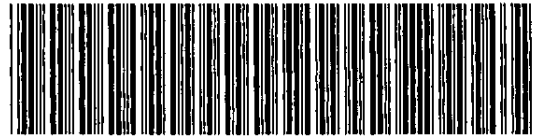
(Business Entity Name)

(Document Number)

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JULIA M. STAB

0126
9/19/13

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DEALER MOTOR VEHICLE REBUILT INC
(Name of Corporation)

DOCUMENT NUMBER: PD4000138457

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

Please return all correspondence concerning this matter to the following:

(Name of Person)

RAMON REYES P.A.
(Name of Firm/Company)

5035 PALM AVE
(Address)

HALEAH FL 33012
(City/State and Zip Code)

For further information concerning this matter, please call:

RAMON REYES at (305) 822-0669
(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
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**

I, TERESITA M. BROUSSALIS, hereby resign as VICE-PRESIDENT
(Title)

of DEALER MOTOR VEHICLE REBUILT INC
(Name of Corporation)

PD4000138457, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA



(Signature of resigning officer/director)

FILED
13 SEP 12 PM 2:51
TALLAHASSEE, 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

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FOR A CORPORATION**

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(Title)

of DEALER MOTOR VEHICLE REBUILT INC,
(Name of Corporation)

P04000138457, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Teresita M. Broussalis

(Signature of resigning officer/director)

FILED
13 SEP 12 PM 2:51
TALLAHASSEE, FLORIDA

FILING FEE IS \$35.00

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Tallahassee, Florida 32314