

H87654

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

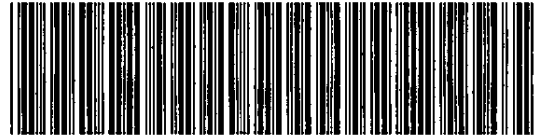
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700311672927

04/17/18--01026--018 **455.00

SECRETARY OF REVENUE
TALLAHASSEE, FLORIDA

18 APR 17 PM 4:08

FILED

APR 18 2018

S. YOUNG

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Comcar Services, Inc.
(Name of Corporation)

DOCUMENT NUMBER: H87654

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

Please return all correspondence concerning this matter to the following:

Manuel A. Alvare, III

(Name of Person)

Comcar Industries, Inc.

(Name of Firm/Company)

502 E. Bridgers Avenue

(Address)

Auburndale, FL 33823

(City/State and Zip Code)

For further information concerning this matter, please call:

Manuel A. Alvare, III

(Name of Person)

at (863) 965-6871

(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, Renee Roop, hereby resign as Secretary
(Title)

of Comcar Services, Inc.
(Name of Corporation)

H87654, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

FILED
18 APR 17 PM 4:08
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