MICHAEL B. UDELL ATTORNEY AT LAW P. O. BOX 841207 PEMBROKE PINES, FL 33084 900002211549--8 -06/13/97--01056--001 Office Unique 8.00 *****35.00 City/State/Zip Phone # CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy ☐ Walk in Pick up time Mail out ☐ Will wait Certificate of Status Photocopy NEW FILINGS AMENDMENTS Profit Amendment NonProfit Resignation of R.A., Officer/ Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other **Merger** REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign **Fictitious Name**

Limited Partnership

Reinstatement Trademark

Other

Examiner's Initials

Name Reservation



Florida Department of State, Jim Smith, Secretary of State Constitution Of Officer And/Or Director

AFFIDAVIT OF RESIGNATION OF OFFICER AND/OR DIRECTOR

STATE OF FLORIDA	~
COUNTY OF	
I, ARNOLD NESE after be knowledge, information and belief, and und correct:	being duly sworn, state that to the best of my der the penalties of perjury, the following is true and
I, <u>ARNOLD NESE</u> , he	reby resign as Vice-President/Director of (Title)
ARNOLD'S PAINT & BODY, INC.	, a Florida corporation;
(Name of Corporation)	
That the corporation has been notified in w	riting of the resignation.
	Signature of resigning officer/director ARNOLD NESE
Sworn to and subscribed before me this _	10th day of JUNE 1997
	The for form
My Commission Expires: FILING FEE IS \$35.00	NOTARY PLOSION CO. STATE C

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E044 (7-90)