J96312

(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:
opedial insulations to 1 ming chicer.

Office Use Only



700042446077

11/08/04--01017--008 **35.00

O4 NOV -8 PM 3: 23

officer Resignation

T BROWN NOV 1 6 2004

TRANSMITTAL LETTER

SUBJECT: A-1 Limousing LTO TWC. (Name of Corporation)
DOCUMENT NUMBER: <u>J96312</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Louis Dragotta (Name of Person)
A-I LIMOUSINE LTO THE (Name of Firm/Company)
HOLL S. UNIVERSITY OR PMB 453 (Address)
DAULE FL 33328 (City/State and Zip Code)
For further information concerning this matter, please call:
Louis DIA (5017) at (954) 769-8063 (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
409 E. Gaines Street
Tallahassee, FL 32399

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	Louis Dracotta , hereby resign as DIRECTOR Officed (Title)
of	A-1 LIMOUSINE LTO, TWC. (Name of Corporation)
	(Document Number, if known), a corporation organized under the laws of the State of
	FLOKIPA.
	(Signature of resigning officer/director)
	DELLE STATE OF THE

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