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TO CORRESPON

COVER LETTER

TO:	Amendment Section of Corp	
SUB.	_{JECT:} All Eur	opean Auto Repair, Inc.
DOC	UMENT NUMBE	(Name of Corporation) R: K91519
The e	enclosed Resignation	n of Registered Agent for a Corporation and fee are submitted for filing.
Pleas	e return all corresp	ondence concerning this matter to the following:
Jul	liette Aoua	di Lowe
	1	Name of Person)
	, 	
	(Nam	e of Firm/Company)
18	68 SE Har	rison St.
		(Address)
Stu	uart, FL 34	997
	(City/	State and Zip Code)
For fi	urther information	concerning this matter, please call:
Jul	liette Aoua	di Lowe at 561 401-1156
	(Name of	Person) (Area Code & Daytime Telephone Number)
Enclo or \$3	osed is a check mad 5.00 for an admini	
Amer Divis Clifto 2661	et Address:	Post Office Box 6327

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned.
hereby resigns as Registered Agent for All European Auto Repairs Inc. (Name of Corporation)
K91519
(Document Number, if known)
A copy of this resignation was mailed to the above listed corporation at its last known address.
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed
(Signature of Resigning Agent)
If signing on behalf of an entity:
(Typed or Printed Name)
(Capacity)
\$87.50 - Active Corporation S33.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation
Make checks payable to Florida Department of State and mail to Division of Corporations P.O. Box 6327 Tallahassee, FL 32314