

L30103

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

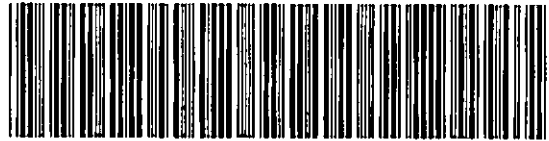
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700354370637

11/02/20--01009--010 \*\*35.00

2020 NOV -2 PM 6:00

FILED

DEC 11 2020

S. YOUNG

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** K.A.M. AUTO PARTS, INC.  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** L30103  
\_\_\_\_\_

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. Andrade  
\_\_\_\_\_  
(Name of Person)

K.A.M. Auto Parts, Inc.  
\_\_\_\_\_  
(Name of Firm/Company)

13771 NW 19th Avenue  
\_\_\_\_\_  
(Address)

Opa Locka, FL 33054  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Manuel A. Andrade at (786) 636-7480  
\_\_\_\_\_  
(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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Hideliza Perez, hereby resign as Secretary  
(Title)

of K.A.M. Auto Parts, Inc.  
(Name of Corporation)

L30103, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

*Hideliza Perez*  
(Signature of resigning officer/director)

2023 NOV -2 PM 6:00

FILED

**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