POW06443

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SECRETARY OF STATE
TALLAHASSEE STATE

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Gregs Complete Auto Legair and Sciles (re (Name of Corporation)
DOCUMENT NUMBER: P 000000 6443
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Ingrid E ludfors (Name of Person) Greg's Complete Auto Regair and Sals Ine (Name of Firm/Company)
(Name of Firm/Company)
5210 Old Winter Gardin rd. (Address)
Olando, A. 32511 (City/State and Zip Code)
For further information concerning this matter, please call:
Ingrid Lindford at (407) 523-5917 (Name of Person) at (407) 523-5917 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, A. Marie Godon	ii), hereby resign as Beesu	iers Do he	lopuet
of Greg's Comple	ete Dute Papar ne of Corporation)		_,
P0000006443 (Document Number, if known)	, a corporation organized under the laws	of the State of	
Florida	·		
	May Hadowo (Signature of resigning officer/director)		
	FILING FEE IS \$35.00	2008 HAY 12 AM 10: SECRETARY OF STATALLAHASSEE, FLOR	

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314