P00000117500

(Reque	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	state/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Nam	e)
(Docui	ment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fili Sul N.C. To J.C.	ing Officer: Wak OID Ed On	Advised Rea File

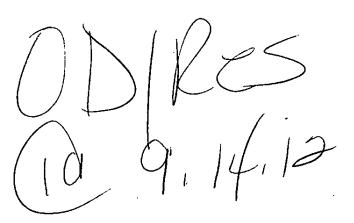
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COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Beasley Tire Co. (Name of Corporation)				
DOCUMENT NUMBER: <u>P00000117560</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:				
HAROLD Beasley (Name of Person)				
Beasley Tire Co. (Name of Firm/Company)				
P. O. Box 980 (Address)				
TNGLIS, FL 34449 (City/State and Zip Code)				
For further information concerning this matter, please call:				
Sue Nowak at (352) 447-3/74 (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
Post Office Box 6327

Tallahassee, FL 32314

CR2E044(08/05)

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. SEAN HAMILTON	, hereby resign as	DIRECTOR (Title)	
of Beasley Tire Co.	poration)		,
P0000117560, a c	corporation organized und	er the laws of the Sta	ate of
FLORIDA.			
Sean H	anulton ure of resigning officer/director		
(Signati	ire of resigning officer/directo	i r)	NE SEP 13
			V

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