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(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	∋ #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nan	ne)
(Do	ocument Number)	
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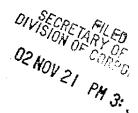
TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Name of Corporation)	al I car distrib
DOCUMENT NUMBER: POLOGOOG G7789	/*. /*.va= . ———g
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.	_
Please return all correspondence concerning this matter to the following:	
Pocholo TVAN BRAVO (Name of Person)	32.A
(Name of Firm/Company)	فقده ا
707 NE US HIGHWAY 19 (Address)	
CRUSTAL RIVER FL 34439 (City/State and Zip Code)	
For further information concerning this matter, please call:	
VIOLETO P. ABAMA at (35) 563-0910 (Name of Person) (Area Code & Daytime Telephone Number)	, went
Enclosed is a check for \$35.00 made payable to the Florida Department of State.	

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tailahassee, FL 32314





I, POCHOLO IVAN BRAW hereby resign as PRESIDENT
(Title)
of JL 7061 N Corporated (Name of Corporation)
Polopo 67 84, a corporation organized under the laws of the State of (Document Number, if known)
FORIDA
Pochelo Dan Brano
(Signature of resigning officer/director)

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