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Office Use Only

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SECRETARY OF STATE

## **COVER LETTER**

| SUBJECT: Solver Pal Mane of Corporation)  DOCUMENT NUMBER: POLOCO & 60007  The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  Please return all correspondence concerning this matter to the following:  Charles Rebozo (Name of Person)  Solve Palm Arb Sales Wa  (Name of Firm/Company)  2333 Solve Harburg  (Address)  And Planda 33032  (City/State and Zip Code)  For further information concerning this matter, please call:  Charles Rebozo (Name of Person)  at (305) 495-3342  (Area Code & Daytime Telephone Number) | Division of Corporations   |
|---|--|
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  Please return all correspondence concerning this matter to the following:  Charles Rebozo (Name of Person)  Silve Rahm Arb Salas Inc.  (Name of Firm/Company)  2333 So. Dire Habray  (Address)  Anni Flanda 33032  (City/State and Zip Code)  For further information concerning this matter, please call:   | SUBJECT: Silver Palm Auto Sales Inc. (Name of Corporation)                                     |
| Please return all correspondence concerning this matter to the following:  Charles Rebozo (Name of Person)  Silver Palm Auto Sales Wa (Name of Firm/Company)  A333 So. Divise Hybrary  (Address)  MiAMI Planda 33032  (City/State and Zip Code)  For further information concerning this matter, please call:   | DOCUMENT NUMBER: POLOCOOOOOOO  |
| Charles Rebozo (Name of Person)  Silver Palm Auto Seles Inc (Name of Firm/Company)  2333 So. Dixie Hychway (Address)  Miami Panda 33032 (City/State and Zip Code)  For further information concerning this matter, please call:   | The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  |
| Silver Palm Auto Sales Inc  (Name of Firm/Company)  2333 So. Dixie Hybray  (Address)  Anni Planda 33032  (City/State and Zip Code)  For further information concerning this matter, please call:  | Please return all correspondence concerning this matter to the following:                      |
| (Address)  Anni Planda 33032  (City/State and Zip Code)  For further information concerning this matter, please call:   | Charles Rebozo (Name of Person)  |
| For further information concerning this matter, please call:  | Silver Palm Auto Salas INC<br>(Name of Firm/Company)   |
| For further information concerning this matter, please call:  | (Address) So. Dixie Highway  |
| · · · · · · · · · · · · · · · · · · ·   | City/State and Zip Code)   |
| Charles Rebozo at (305) 495-3342 (Name of Person) at (Area Code & Daytime Telephone Number)   | For further information concerning this matter, please call:                                   |
|   | Charles Rebozo at (305) 495-3342<br>(Name of Person) at (Area Code & Daytime Telephone Number) |

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

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| I, Charles R  | elsozo                  | , hereby res        | sign as        | Oirector (Title)  |  |       |
|---------------|-------------------------|---------------------|----------------|-------------------|--|-------|
| of Silver     | Pal m<br>(Name of Corpo | Auto                | Sales          | INC.              | ······································ |       |
| P 01 0000 86: | 207 ,aco                | •                   | ized under the | laws of the State | e of                                   |       |
| FLORIDA       | ·                       |                     |                |                   |  |       |
|               | M)-1                    |                     |                |                   |  |       |
| . <u> </u>    | (Signature              | e of resigning offi | cer/director)  |                   | 05 AUG 28                              |       |
|               |                         | . ′                 |                |                   | J6 28 F                                | 照明    |
|               | FILIN                   | G FEE IS \$35.      | 00             |                   | PM 4: 29                               | STATE |

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

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