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PICK-UF	Þ	☐ WAIT	MAIL
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SECTE THE STATE FLORIDA

officer Resignation

Office Use Only

T BROWN NOV 1 9 2004

TRANSMITTAL LETTER

TO: Amendment Division of	nt Section f Corporation	s				
SUBJECT:	BELOW	Book	Mo.	TOR CARS	/VC.	
DOCUMENT NU		P02000	Name of	306		
The enclosed Office	er/Director R	esignation fo	r a Cor	poration and fee	are submitted for fi	ling
Please return all co	rrespondence	concerning t	his mat	ter to the followi	ng:	
GINA	ALVA (Name of	REZ				
BELOW	Book	M DTOR C	ARS,	INC.		
!	(Name of Firm	/Company)				
170148	W . F	MIRBANK	45	AVE.		
WINTER	PARK	C, FL.	327	289		
•	(City/State and	Zip Code)				
For further informa	tion concerni	ng this matter	r, please	call:		
GINA	ALVA RE	Z	et (07 647	- ススタタ ne Telephone Numbe	_
(Na	me of Person)		(Ar	ea Code & Daytin	ie Telephone Numbe	T)
Enclosed is a check	for \$35.00 m	ade payable t	to the F	lorida Departme	nt of State.	
Mailing Address: Amendment Section Division of Corpora P.O. Box 6327 Tallahassee, FL 32	tions	Street A Amendm Division 409 E. G Tallahass	ent Sec of Corp aines Si	ction corations creet		

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SECRETAL STATE
TALLAHACSTE FLORIDA

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, _	ABOUL	B. 1	RIFAL	, hereby resign as	V/C€	PRESIDENT
	BELOW	BOOK	MOT	TOR CARS, IN	C .	(Title)
of	<i>3</i> (± 3		ame of Corpora	•		•
	P0200005	0306	a com	oration organized unde	er the laws o	of the State of
	(Document Number,	if known)	, F	3.5		U
	FLORIDA					
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		/	11/	1		
		U	/ Kyb-			
			(Signature o	f 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