

PD2 DDDO 84589

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

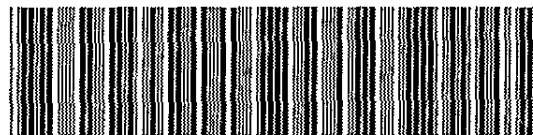
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Red Cap Limo, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P02000084589

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Philip S Kaprow, Esq.

(Name of Person)

Philip S Kaprow, PA

(Name of Firm/Company)

Post Office Box 195516

(Address)

Winter Springs, FL 32719-5516

(City/State and Zip Code)

For further information concerning this matter, please call:

Philip S Kaprow, Esq

(Name of Person)

at (407) 971-8460

(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

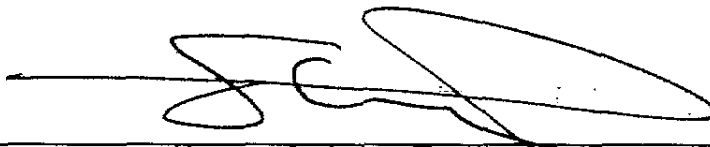
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Joseph A Georgi, hereby resign as PSTD
(Title)

of Red Cap Limo, Inc.
(Name of Corporation)

P02000084589, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(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