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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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COVER LETTER

SUBJECT: LIMO DEPOT TWO,
(Name of Corporation)

DOCUMENT NUMBER: PO 2000/03476

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

Please return all correspondence concerning this matter to the following:

VINCENT TRANCHINA
(Name of Person)

LIMO DEPOT INC.
(Name of Firm/Company)

906 N. /3TH AVE
(Address)

HOLLY WOOD H, 33019
(City/State and Ziv/Code)

For further information concerning this matter, please call:

VIN TRANCHINH at (954) 445-2139
(Name of Person) (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

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, <u> </u>	Olocoy	NOUCOV C	nereby resign as S	PRESIDENT OFF	D NEWSTE
of	Limo	DEPOT (Name of Corpora	tion) Two,		AGEN,
_P	O 2000 Document Number, if	/03	oration organized unde	er the laws of the State of	
	ELORID	D			

(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 FILED

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