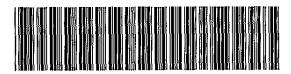
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(Re	equestor's Name)			
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R.A. Resignation

Office Use Only

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Gulfstream USA Motor Group, Inc.
(Name of Corporation)
DOCUMENT NUMBER: P02000113311
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Stephen J. Padula, Esquire
(Name of Person)
Taylor Hodkin Kopelowitz & Ostrow, P.A.
(Name of Firm/Company)
350 E. Las Olas Blvd., Suite 1440
(Address)
Ft. Lauderdale, Florida 33301
(City/State and Zip Code)
For further information concerning this matter, please call:
Stephen J. Padula, Esquire at (954) 525-4100 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

FOR A	OF REGISTERED AGENT A CORPORATION	FILED 05 JUN 27 AM 9: 02 ALLAH ISSEE FLORIDA		
Pursuant to the provisions of sections $607.0502(2)$, $617.0502(2)$, 607.1509 , or 617.1509 ,				
Florida Statutes, the undersigned,	Stephen J. Padula, Esquire (Name of Registered Agent)			
hereby resigns as Registered Agent for	Gulfstream USA Motor Group (Name of Corporation)	, Inc.		
P02000113311				
(Document Number, if known)		•		
A copy of this resignation was mailed to the	he above listed corporation at its last	known address.		
The agency is terminated and the office di this statement is filed.	scontinued on the 31st day after the day aft	ate on which		
If signing on behalf of an entity:				
•	J. Padula, Esquire	- <u>.</u>		
(Ту	ped or Printed Name)			
as Regi	istered Agent			

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

(Capacity)