

PO30000026794

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

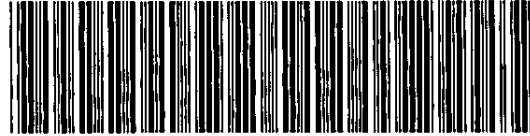
(Business Entity Name)

(Document Number)

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14 DEC -9 PM 2:33

DEC 15 2014

T. CARTER

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: BEN'S AUTO REPAIR ENTERPRISES, INC.  
(Name of Corporation)

DOCUMENT NUMBER: P03000026794

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

Please return all correspondence concerning this matter to the following:

AUBIN ROBINSON, ESQ  
(Name of Person)

AUBIN ROBINSON & ASSOCIATES PA  
(Name of Firm/Company)

P.O. BOX 210425  
(Address)

ROYAL PALM BCH, FL 33421-0425  
(City/State and Zip Code)

For further information concerning this matter, please call:

CLAUDENE GOODEN at (561) 333-8755  
(Name of Person) (Area Code & Daytime Telephone Number)

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

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

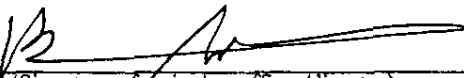
14 DEC -9 PM 2:33

I, ABDEL AZIZ-BEN DAUD, hereby resign as Director,  
President, Treasurer and Secretary  
(Title)

of BEN'S AUTO REPAIR ENTERPRISES, INC.  
(Name of Corporation)

P03000020794, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

ABDEL AZIZ BEN DAUD

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