P03000041332

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
,							





300126266173

04/29/00--01013--005 **35.00

2008 APR 29 AM 8: 31
SECRETARY OF STATE

Officer Resignation

TB 5/0-08

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: MOT CARS IN	1C ,		
	(Nam	e of Corpora	ation)
DOCUMENT NUMBER:_	P03000041332		
The enclosed Officer/Directo	r Resignation for a C	Corporation	and fee are submitted for filing
Please return all corresponder	nce concerning this	matter to th	e following:
DELAINA L RUPP			J
(Name	of Person)		
MOT CARS INC			
(Name of F	irm/Company)		
6601 SHANGRILA LN			
(Ad	ldress)	······································	
LANTANA FLORIDA 334	462		
(City/State	and Zip Code)		
For further information conce	rning this matter, pl	ease call:	
QAVID J RUPP	at (561	533 7945
(Name of Perso		(Area Code	& Daytime Telephone Number)
Enclosed is a check for \$35.0	0 made navable to the	he Florida I	Department of State.
			- character as managed

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, DAVID J RUPP		_, hereby resign asPF	DIRECTOR	_	
of M.O.T.	CAR'S INC. (Name of Corporati	tion)		,	
P03000041332 (Document Number	er, if known)	oration organized under	the laws of th	e State of	
FLORIDA	·				
_	(Signature of	pesigning officer/director)) P	2008 APR 29 AM 8: 31 SECRETARY OF STATE TALLAHASSEE, FLORIDA	TIE

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