P03000054405

(Re	questor's Name)	
(Ad	dress)	<u> </u>
·	,	
(Address)		
(Cit	y/State/Zip/Phone	? #)
PICK-UP	MAIT	MAIL
/ D	-i /i N/	>
(Bu	siness Entity Nan	ne)
(Do	cument Number)	,
Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT. AMERIMOBIL	NC
SUBJECT: AMERIMOBIL I	(Name of Corporation)
DOCUMENT NUMBER:	P03000054405
The enclosed Officer/Director	Resignation for a Corporation and fee are submitted for filing
Please return all correspondence	ce concerning this matter to the following:
MONICA DE LOS RIOS	
	f Person)
0.0	docorre
5///	
(Name of Fi	m/Company)
2246 BALSAN WAY	
(Add	ress)
WELLINGTON, FLORIDA	33414
(City/State a	nd Zip Code)
For further information concer	ning this matter, please call:
MONICA DE LOS RIOS	954 288-0223
(Name of Person	at (954) 288-0223 (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 OSCAR MAURICIO CORONA	hereby resign as_	PRESIDENT/TR/DIRECTOR
<u> </u>	, nerecy resign us_	(Title)
of AMERIMOBIL INC		
(Name	e of Corporation)	
P03000054405 (Document Number, if known)	, a corporation organized ur	nder the laws of the State of
FLORIDA	<u>_</u> .	
	Signature of resigning officer/direct	

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 OS NAR I 4 AN 9: