

PO3000006426

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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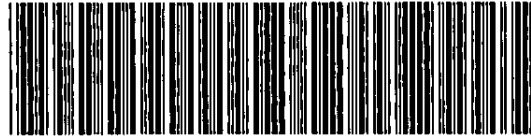
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RIA RES

MAY 02 2014

R. WHITE

PLEASE TAKE MY NAME OFF OF
THIS COMPANY AND
ANY OTHER COMPANY THAT
HAS THIS FED TAX ID

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Automotive Warranty Service Group of Florida
(Name of Corporation)

DOCUMENT NUMBER: 65-1189846

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:

MARIO KACZMAR
(Name of Person)

Automotive Warranty Service Group of Florida
(Name of Firm/Company)

8304 NW 40th Ct
(Address)

Coral Springs, FL 33065
(City/State and Zip Code)

For further information concerning this matter, please call:

MARIO KACZMAR at (954) 551-7019
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

My name should have never been on this company, and I was told my name had been taken off

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, MARIO KAZMAR

(Name of Registered Agent)

hereby resigns as Registered Agent for AUTOMOTIVE WARRANTY SERVICE GROUP

(Name of Corporation)

P03000060426 65-1189846 OF FLORIDA

(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which
this statement is filed.

Mario Kazmar

(Signature of Resigning Agent)

If signing on behalf of an entity:

65-1189846

(Typed or Printed Name)

Nothing to do with this company

(Capacity)

FILED
14 APR 25 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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