P03000079908

(Requestor's	Name)
(Address)	,
(Address)	
(City/State/Z	ip/Phone #)
PICK-UP W	/AIT MAIL
(Business E	ntity Name)
(Document Number)	
Certified Copies Ce	rtificates of Status
Special Instructions to Filing Off	icer:
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SECRE TARY OF STALL PRIVISION OF CORPORATIONS

COVER LETTER

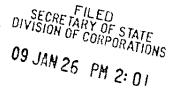
Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



I, Junie Friday, hereby resign as VICT Presiden T
(Title)
of Fridays auto Sales, Inc. (Name of Corporation)
PO 300 OO 7 9 9 0 8 , a corporation organized under the laws of the State of (Document Number, if known)
Florida.
Alle Vilve
(Signature of resigning officer/director)

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