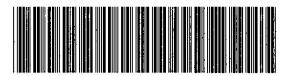
## P03000125366

(Requestor's Name)	_
(Address)	_
( data day	
	_
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
	_
(Business Entity Name)	
(Document Number)	-
Certified Copies Certificates of Status	
Certified Copies Certificates of Claus	_
Special Instructions to Filing Officer:	1
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2008 OCT -3 PH 2: 06
SECRETARY OF STATE
SECRETARSEE. FLORID

officer Resignation
TR 10/10/08

## **COVER LETTER**

Amendment Section Division of Corporations

Tallahassee, FL 32301

TO:

GABLES GARAGE BODY SHOP INC. SUBJECT: (Name of Corporation) P03000125366 DOCUMENT NUMBER:\_\_ The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MADELIN LORENZO (Name of Person) GABLES GARAGE BODY SHOP INC. (Name of Firm/Company) 109 SAN LORENZO AVENUE (Address) CORAL GABLES, FL 33146 (City/State and Zip Code) For further information concerning this matter, please call: Madelin Lorenzo (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Street Address: **Mailing Address:** Amendment Section Amendment Section Division of Corporations **Division of Corporations** Post Office Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

IN ZOOB OCT 3 PM 2: 06

TALLAHASSEE. FLORIDA

Decident

Roberto Lorenzo I,	Vice-Pesident, hereby resign as
	Title)
Gables G	arage Body Shop Inc.
	Name of Corporation)
P03000125366 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	
	(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