

P030000130485

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

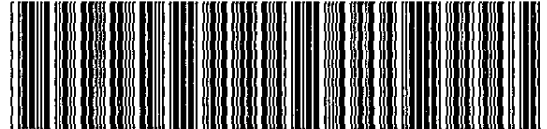
(Document Number)

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FILED  
06 APR 25 AM 10:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 7, 2006

CHARLES H. BALL & ASSOCIATES, P.A.  
% LESLIE A. KEITH  
1444 FIRST STREET - SUITE B  
SARASOTA, FL 34236

SUBJECT: CARZRED, INC.  
Ref. Number: P03000130485

We have received your document for CARZRED, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to resign as officer/director for a corporation is \$35 per person resigning.

Officers must resign on separate forms, please see the enclosed forms.

There is a balance due of \$35.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton  
Document Specialist

Letter Number: 706A00023685

**CHARLES H. BALL & ASSOCIATES, P.A.**

1444 FIRST STREET, SUITE B  
SARASOTA, FLORIDA 34236

CHARLES H. BALL, ESQ.  
H. NIKKI HIMEBAUGH, ESQ.  
D. SCOTT RIETH, ESQ.

PHONE (941) 952-1500  
FAX (941) 953-5736

17 April 2006

Amendment Section  
Division of Corporation  
PO Box 6327  
Tallahassee FL 32314

Re: Carzred, Inc.  
Resignation by Officers or Directors

To Whom It May Concern:

Enclosed with this letter is the individually signed Officer/Director Resignation for a Corporation form and our check in the amount of \$35.00 for the additional filing fee.

If you have any questions or concerns, please do not hesitate to call.

Sincerely,



Leslie A. Keith  
Legal Assistant to Charles H. Ball

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: CARZRED  
(Name of Corporation)

DOCUMENT NUMBER: PD 30000130485

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

GIVEN GIBELLINA  
(Name of Person)

CARZRED  
(Name of Firm/Company)

2750 DE SOTO RD  
(Address)

SARASOTA, FL 34234  
(City/State and Zip Code)

For further information concerning this matter, please call:

GIVEN GIBELLINA at (941) 296-5485  
(Name of Person) (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, CARA ARNOLDY, hereby resign as SECRETARY / DIRECTOR  
(Title)

of CARZRED, INC.  
(Name of Corporation)

P030000130485, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

Carl Arnoldy  
(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

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TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE