

PO3000131977

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

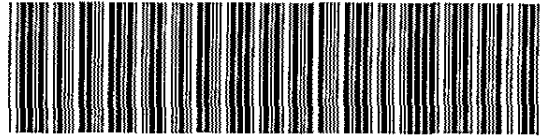
(Business Entity Name)

(Document Number)

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07 OCT 18 AM 10:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01025 CM
10-18-07

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Miami Auto Care, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P03000131977

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

Please return all correspondence concerning this matter to the following:

David Alvarez

(Name of Person)

Miami Auto Care, Inc

(Name of Firm/Company)

8498 Bird Road

(Address)

Miami, FL 33155

(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID ALVAREZ

(Name of Person)

at (305) 226-2172

(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, Domingo Jimenez, hereby resign as VP
(Title)

of Miami Auto CAre, Inc.
(Name of Corporation)

P03000131977, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 OCT 18 AM 10:42

FILED

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