P04000011159

(Requestor's Name)		
(Address)		
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(Address)		
•		
(City/State/Zip/Phone #)		
<u> </u>		
PICK-UP WAIT MAIL		
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(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Superior Sound 8	Auto Accessories Corp (Name of Corporation)
DOCUMENT NUMBER: PO	*
The enclosed Officer/Director Re	esignation for a Corporation and fee are submitted for filing
Please return all correspondence	concerning this matter to the following:
Luis Hernan	idez
, (Name of P	erson)
Superior Sound & Auto	Accessories Corn
(Name of Firm/	· · · · · · · · · · · · · · · · · · ·
·	• •
5990 West 20	
(Addres	ss)
Hialeah, FL	33016
(City/State and	Zip Code)
For further information concernit	ng this matter, please call:
Luis Hernandez (Name of Person)	at (786) 232-1512 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area code & Daytime Telephone Namoer)
Enclosed is a check for \$35.00 m	ade 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
	G.

FILED

OFFICER / DIRECTOR RESIGNATION 08 FEB 18 PM 3: 58

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Ramberto Berencen	, hereby resign as Vice-President
	(Title)
of Superior Sound & Auto Accessories	
P04000011159 .a c	orporation organized under the laws of the State of
Florida	
* /2	Descuesa
(Signatu	re 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