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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	
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Office Use Only



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SELINE DATE OF STATE
ALLAHASSEE, FLORID.

11/11/04 OID Rec. SP

TRANSMITTAL LETTER

	on of Corpora			-		-
SUBJECT:_	Doobe	Brutheis	RACING (Name of Corpor	TEAM ration)	Inc	·
		10400			·	
The enclosed	Officer/Direc	tor Resignation f	or a Corporation	n and fee are	submitted f	or filing
Please return	all correspond	lence concerning	this matter to the	he following		
mich	NACL PA	rkuff				
	(Nan	ne of Person)	,	-	* **··	
15969	•	Firm/Company) Veek D(1 Address)	ve	<u>.</u>	.	-
DelRAY	BCACH (City/Sta	FL 3349 te and Zip Code)	46	-		
For further in	formation cor	cerning this matt	er, please call:			
Michael	Parko (Name of Pe	rson)	_at <u>(561</u> (Area Cod	254 - le & Daytime	Z& L & Telephone N	umber)
Enclosed is a	check for \$35	5.00 made payable	e to the Florida	Department	of State.	
Mailing Add Amendment S Division of C P.O. Box 632 Tallahassee. I	Section orporations 7	Divisio 409 E.	Address: Iment Section on of Corporatio Gaines Street assee, FL 3239	ons 9		_

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Michael Pankort, hereby resign as Uice President a Director
of DOObe Brothers RACING TEAM, Inc. (Name of Corporation)
Po4000 33416 a corporation organized under the laws of the State of (Document Number, if known)
FLOVIOA
(Signature of resigning officer/director) (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