## PO4000082691

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Chi) Sales 2 pri none n)
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(Business Entity Name)
(Document Number)
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: PROFSESSION AC TOWING INC (Name of Corporation)  DOCUMENT NUMBER: P04000082691
DOCUMENT NUMBER: P04000082691
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Kovin Piller (Name of Person)
PROFESSIONAL TOWING INC (Name of Firm/Company)
915 Bolender Drive (Address)
Delray Bch If 33483 (City/State and Zip Code)
For further information concerning this matter, please call:
Kevi N P. Hen at (Jb1) JB - 7676  (Name of Person) at (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 06 APR - 6 AM 8: 47

FOR A CORPORATION

I, Ke VIN Piller, hereby resign as President (Title)

of Professional Towing, Inc.

(Name of Corporation)

(Document Number, if known)

FOR 10 APR - 6 AM 8: 47

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314