

P04000111351

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

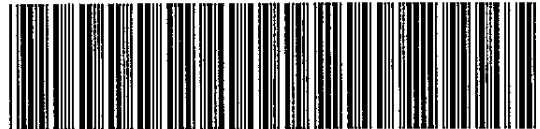
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

FS 10/28/04
O/D RES.

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SKY AUTO TRANSPORT INC.
(Name of Corporation)

DOCUMENT NUMBER: PO4000111351

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

Please return all correspondence concerning this matter to the following:

NIR MORDECHAY
(Name of Person)

SKY AUTO TRANSPORT INC.
(Name of Firm/Company)

P.O. Box 100708
(Address)

CAPE CORAL FLORIDA 33910
(City/State and Zip Code)

For further information concerning this matter, please call:

NIR MORDECHAY at (954) 647-1700
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

FILED

04 OCT 20 AM 10:23

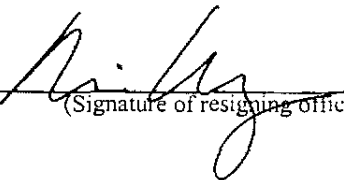
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

I, NIR MORDECHAY, hereby resign as VICE PRESIDENT
(Title)

of SISKY AUTO TRANSPORT, INC.
(Name of Corporation)

P2400011351, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(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