## PO4000150344

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
	<b></b>	

Office Use Only



700293882317

01/20/17--01004--025 \*\*35.00



الري المراد

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: ROSE MOTOR SPORTS, Inc. (Name of Corporation)		
DOCUMENT NUMBER: P04000 150 344		
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Rachelle Rose (Namc of Person)		
(Name of Person)		
Rose Motorsports Inc. (Name of Firm/Company)		
(Name of Firm/Complany)		
2323 Bruner Ln		
(Address)		
Ft. Myers, FL 339/2 (City/State and Zip Code)		
For further information concerning this matter, please call:		
TAMES ROSE at (339, 896-2882) (Name of Person) at (Area Code & Daytime Telephone Number)		
(Name of Person) (Area Code & Daytime Telephone Number)		

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

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

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Rachelle Rose, hereby resign as President, Director
of Rose Motorsports Inc. (Name of Corporation)
P04000150344 , 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