## P05000084321

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	
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Office Use Only



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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: SUPREMEAUTOGEAR  (Name of Corporation)  DOCUMENT NUMBER: POSOPOO84321
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filling
Please return all correspondence concerning this matter to the following:
Sencio Brok (Name of Person)
Sulneme ATOLEAN (Name of Firm/Company)
346 NW 11877 AVF (Address)
Carga SPRINGS FL 33071 (City/State and Zip Code)
For further information concerning this matter, please call:
Str. 6.0 Blok at (954) 4781783 (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

I.	SERGIO HUERTA hereby resign as PRESIDE	ENT
		Γitle)
of	SUPREME AUTOGEAR INC	
	(Name of Corporation)	
<u> </u>	(Document Number, if known), a corporation organized under the laws of the	e State of
<u>于</u>	LORIDA	ASS OS
	Leex Jr. Za	RY OF STA
	(Signafure of resigning officer/director)	23 23

## 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