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Certified Copies	Certificate	s of Status
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SECRETARY OF STATE
TALLARS FOR STATE

Office Use Only

off. Resign.
TB 7-7-09

## **COVER LETTER**

Division of Corporations
SUBJECT: DIXIE WAY MOTORS, INC (Name of Corporation)
DOCUMENT NUMBER: POSODO 92770
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
FRANCISCA MONTILIA C (Name of Person)
(Name of Firm/Company)
1301 SEA PINES WAY (Address)
LANTANA F( 33462 (City/State and Zip Code)
For further information concerning this matter, please call:
FINDRES CEDENO at (561) 385 8156 (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
Post Office Box 6327

Tallahassee, FL 32314

CR2E044(08/05) -

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

TO:

Amendment Section

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

TAISECRE AND AND SOLUTION OF CONTROL OF CONT

I, MONTI IIA, FRANCISCA C_, hereby resign as_	DS (Title)	- A/O2
of DIXIEWAY MOTORS, Inc. (Name of Corporation)		,
Posoooo 92770, a corporation organized under (Document Number, if known)	er the laws of the State o	f
Elorida		

(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