

P05000133199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

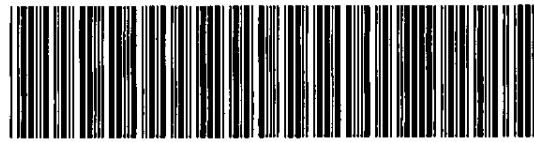
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Off. Recs.

APR 13 2012

T. BROWN

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LUIS E. GARCIA MOTOR MOBILE SERVICES INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P05000133199

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

Please return all correspondence concerning this matter to the following:

AIDA L. CAPOTE

(Name of Person)

(Name of Firm/Company)

150 OCEAN LANE DRIVE 1A

(Address)

KEY BYSCAYNE, FL 33149

(City/State and Zip Code)

For further information concerning this matter, please call:

AIDA L CAPOTE

(Name of Person)

at 786 488-6648

(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  
FOR A CORPORATION**

FILED  
2012 APR 12 PM 3:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, AIDA L. CAPOTE, hereby resign as VICE PRESIDENT  
(Title)

of LUIS E. GARCIA MOTOR MOBILE SERVICES INC.,  
(Name of Corporation)

P05000133199, 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