P06000022872

(Requestor's Name)				
(Address)				
(
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT	MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status	.			
Special Instructions to Filing Officer:				
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RIDA

officer Resignation

Office Use Only

10-30-07

TB

COVER LETTER

Amendment Section Division of Corporations

TO:

CR2E044(08/05)

SUBJECT:	Auto Collision	n Experts of Palm	Beach			
50202011_		(Nan	ne of Corpo	ration)		
DOCUMENT	Γ NUMBER:_	P06000022872				
The enclosed	Officer/Directo	r Resignation for a	Corporatio	n and fee are	submitted for	or filing.
Please return	all corresponde	nce concerning this	matter to t	he following:	:	
	Richar	d Mahler	•	~		
	(Name	of Person)		-		
Au	to Collision Ex	perts of Palm Bea	ach			
	(Name of F	irm/Company)		-		
	1500 53r	d Street				
	(Ad	ldress)		_		
1	Mangonia Park	c / Florida / 33407				
	(City/State	and Zip Code)		-		
For further in	formation conce	erning this matter, p	lease call:			
	Richard Mah	ler at t	561	848-3490 le & Daytime	0	
	(Name of Pers	on)	(Area Cod	le & Daytime	Telephone N	umber)
Enclosed is a	check for \$35.0	0 made payable to	the Florida	Department	of State.	
Street Addre Amendment S Division of Co Clifton Buildi 2661 Executiv Tallahassee, F	ection orporations ng e Center Circle	Mailing Ac Amendmer Division of Post Office Tallahassee	Corporation Box 6327	ons 4		
α	~ q 0c	tober 1st-	工人	esiz	from	President + Sec
	Auto	Coursia E	xpens))	

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Kimberly Mahler	, hereby resign as_	President & Secretary			
		(Title)			
Auto Collisi	ion Experts of Palm Beach,	Inc.			
(Nar	me of Corporation)	· · · · · · · · · · · · · · · · · · ·			
P06000022872	, a corporation organized under the laws of the State of				
(Document Number, if known)	, a corporation organized under the laws of the batte of				
Florida		. ~ :			
		7007 OCT SECRE TALLAR			
		FAR OCT			
		29 HASSE			
1	. /	E P III			
	Kalue				
·	(Signature of resigning officer/direct	3: 45 STATE ELORIDE			

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