P000000030543

(Re	equestor's Name)	
(Ad	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		



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TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Henderson auto sales inc. (Name of Corporation)
DOCUMENT NUMBER: Pro 60006 365 43
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
<u>Victoria Henderson</u> (Name of Person)
Henderson auto Salos inc. (Name of Firm/Company)
405 E. 8 St. (Address)
Hialeah FL 33010 (City/State and Zip Code)
For further information concerning this matter, please call:
Vieloria Henderson at (305) 623 2565 - 321 960 828 (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
P.O. Box 6327
Tallahassee, FL 32314

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Michel Villanuera, hereby resign as V.P. Sceretary (Title)
of Henderson auto Sales Inc. (Name of Corporation)
Po 600036543 , a corporation organized under the laws of the State of (Document Number, if known)
Florida
1
(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 2815 HAY 26 PM 1:58

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