P000003796/

(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:				

Office Use Only

6274



400131678834

06/26/08--01014--002 **35.00

108 JUN 26 AM 8: 24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



COVER LETTER

1
SUBJECT: 1 C AUTO SALES CORP. (Name of Corporation)
DOCUMENT NUMBER: P 0600 00 3 7 96 1
DOCUMENT NUMBER: Y 06000037961
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Allison GONTALEZ (Name of Person)
1C AUTO SALES CORP (Name of Firm/Company)
1455 W. LAND STREET RD SITE 410 (Address)
ORLANDS FL 32824 (City/State and Zip Code)
For further information concerning this matter, please call:
Alli Sow Gov ZAF2 at (407) 591-9242 (Name of Person) (Area Code & Daytime Telephone Number)
(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 Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	IVAN CASAS	, hereby resign as	SECRETARY (Title)	
of	I C AUTO	SALES CORP		
	P 06 00 00 3 7 96 1 (Document Number, if known)	, a corporation organized und	ler the laws of the State of	
	Florida			
	Thau	Signature of resigning officer/director	2008 JUN 26 AH 8: 24 SECRETARY OF STATE TALLAHASSEE, FLORID	TILED

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