

186000099639

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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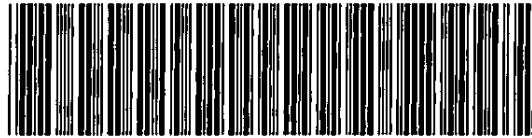
(Business Entity Name)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Caribbean Auto Rentals, Corp.
(Name of Corporation)

DOCUMENT NUMBER: PO6000099639

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

Please return all correspondence concerning this matter to the following:

Miguel Carmona
(Name of Person)

Caribbean Auto Rentals, Corp.
(Name of Firm/Company)

1224 NE 18 Place
(Address)

Cape Coral, FL 33909
(City/State and Zip Code)

For further information concerning this matter, please call:

Miguel Carmona at (239) 297-3710
(Name of Person) (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

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**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Miguel Carmona, hereby resign as Secretary
(Title)

of Caribbean Auto Rentals, Corp.
(Name of Corporation)

P06000099639, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.

Miguel Carmona
(Signature of resigning officer/director)

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TALLAHASSEE, FLORIDA

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