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(Fi	Requestor's Name)	
A)	ddress)	
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PICK-UP		MAIL
: (B	usiness Entity Nan	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	o Filing Officer:	· · ·
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COVER LETTER

TO: Amendment Section Division of Corporations

Executive Automotive Corp (Name of Corporation) SUBJECT:

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

Please return all correspondence concerning this matter to the following:

WAKEN Musselwhite III (Name of Person)

Executive Automitive Curp (Name of Firm/Company)

2544 JMT Industrial 12#103 (Address)

Apipka Fl. 32703 (City/State and Zip Code)

For further information concerning this matter, please call:

Ware of Person) at (107) 927.3825 (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 <u>Mailing Address:</u> Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION	AS HUB SECONDER OF STREET
I, WAYNE Decrick Musselwhite, hereby resign as Thes. (Title)	
of <u>Executive Automative COKP</u> (Name of Corporation)	_,
PDDDDDDDDD, 069, a corporation organized under the laws of the State of (Document Number, if known)	
<u> </u>	

(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