PD7000039273

(Requestor's Name)				
(Ad	dress)			
(Ad	dress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL MAIL		
(Bu	siness Entity Nam	ne) ·		
(DO	cument Number)			
Certified Copies	Certificates	of Status		
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Special Instructions to Filing Officer:				
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COVER LETTER

	Amendment Section Division of Corporations
SUBJE	CT: Car Concepts Remarketing Specialists
00001	(Name of Corporation)
DOCU	MENT NUMBER: P07000039273
The enc	closed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please r	eturn all correspondence concerning this matter to the following:
Luiz E	Eduardo Oliveira
	(Name of Person)
Car C	oncepts Remarketing Specialists
-	(Name of Firm/Company)
3435	NW 19th St
	(Address)
Laude	erdale Lakes, FL 33311
	(City/State and Zip Code)
For furt	her information concerning this matter, please call:
Allison	Powell at (754) 581-0421 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclose	ed is a check for \$35.00 made payable to the Florida Department of State.
Amendi Division Clifton 2661 Ex	Address: ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Luiz E	Oliveira	, hereby resign as_	President/Secretary/VP/Trea
of_Car Conc	epts Remarketing	Specialists ame of Corporation)	
P07000392	73 It Number, if known)	, a corporation organized un	der the laws of the State of
Florida		·	

(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

SECRETARY OF STALE AND A SECRETARY OF STALE AND SEE, FLORIDA TALL ANA SEE, FLORIDA