

P07000073791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

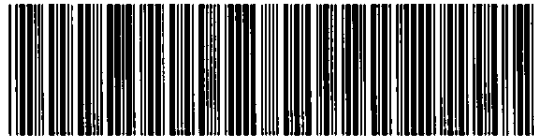
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TALLAHASSEE, FLORIDA

Off Resign
News
5-13-09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 24/7 Day and Night Car Wash

(Name of Corporation)

DOCUMENT NUMBER: P07000073191

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

Please return all correspondence concerning this matter to the following:

Jack Mintz

(Name of Person)

24/7 Day and Night Car Wash

(Name of Firm/Company)

2666 North Dixie Highway

(Address)

Ft Lauderdale, FL 33334

(City/State and Zip Code)

For further information concerning this matter, please call:

Jack Mintz

at (954) 566-2661

(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

RECEIVED
2009 MAY - 1 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 4, 2009

JACK MINTZ
24/7 DAY & NIGHT CAR WASH, INC.
2666 NORTH DIXIE HIGHWAY
FORT LAUDERDALE, FL 33334

SUBJECT: 24/7 DAY & NIGHT CAR WASH, INC.
Ref. Number: P07000073791

The fee to resign as officer/director for a corporation is \$35 per person resigning.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 009A00014893

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

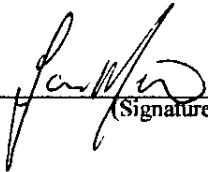
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09 MAY 11 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Jack Mintz, hereby resign as President
(Title)

of 24/7 Day and Night Car Wash,
(Name of Corporation)

P070000 13791, a corporation organized under the laws of the State of
(Document Number, if known)

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