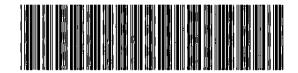
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
· (Only/Otate/Lipit Hollow)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
· ·
·

Office Use Only



200138120842

11/26/08--01010--003 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Palm Beach Gott Carts Inc. (Name of Corporation)
DOCUMENT NUMBER: 10800000000000000000000000000000000000
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Sherit Retcho (Name of Person)
(Name of Firm/Company)
169 SETres-Bellecircle (Address)
Stuart F1. 34997 (City/State and Zip Code)
For further information concerning this matter, please call:
Sheri L. Retcho at (772) 219-4755 (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

FILED

OFFICER / DIRECTOR RESIGNATION 25 AM 10: 38

SECRETARY OF STATE TALLAHASSEE. FLORIDA

1, SheriL. Retcho, hereby resign as Secratary	
(Title)	
of Palm Beach Golf carts, Inc.	
(Name of Corporation)	_
108000026587, 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