

P080000027651

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01/24/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AUTO DORAL COLLISION INC
(Name of Corporation)

DOCUMENT NUMBER: P08000027651

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

Please return all correspondence concerning this matter to the following:

OMAR OCAMPO

(Name of Person)

(Name of Firm/Company)

8264 NW 58 ST

(Address)

DORAL FL 33166

(City/State and Zip Code)

For further information concerning this matter, please call:

OMAR OCAMPO

(Name of Person)

at (786) 355-4024

(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

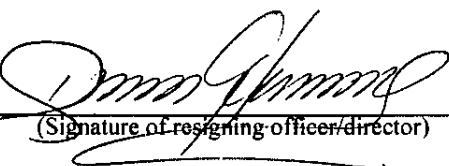
I, LUZ HERRERA, hereby resign as PRESIDENT
(Title)

of AUTO DORAL COLLISION INC
(Name of Corporation)

P08000027651, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

FILED
10 AUG 13 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, 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