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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: 5 STARS AUTO II	NC
50	(Name of Corporation)
DOCUMENT NUMBER: PO	8000029191
The enclosed Officer/Director Re	signation for a Corporation and fee are submitted for filing
Please return all correspondence	concerning this matter to the following:
SMALLS, KRIS	
(Name of Pe	erson)
(Name of Firm/	Company)
602 Pigeon Plum Way	
(Addres	s)
Weston, FL 33327	
(City/State and 2	Zip Code)
For further information concerning	g this matter, please call:
SMALLS, KRIS	at (954) 848-4014 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 ma	ade 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

, SMALLS, KRIS	hereby resign as Vice President	
	(Title)	
of 5 STARS AUTO INC.		
	of Corporation)	<u> </u>
P08000029191 (Document Number, if known)	_, a corporation organized under 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