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COVER LETTER

Amendment Section Division of Corporations TO:

SUBJECT: Mac's Auto Service of Orlando (Name of Co	rporation)			
	160415			
The enclosed Statement of Change of Registered Office/	Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter	to the following:			
	n Collins			
(Maile of Collin	aut i orsony			
Mac's Auto Service of Orlando Inc				
(Firm/Company)				
549 North Golden Rod Road #14 (Address)				
(1144)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Orlanda	EI 32907			
Orlando (City/State and	I Zip Code)			
For further information concerning this matter, please ca	ılı:			
Deborah Collins (Name of Contact Person)	at (407) 208-1400 (Area Code & Daytime Telephone Number)			
(Change of Contact Potocn)	(Med Code & Baytime Telephone Hamber)			
Enclosed is a \$35.00 check made payable to the Departm	nent of State,			
<u>Mailing Address:</u> Amendment Section	Street Address: Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Heather deMaintenon	hereby resign as Pro	esident/Treasurer
		(Title)
of MACS Auto Service of Orland	lo Inc.	
(Nam	e of Corporation)	
Posooo6045 (Document Number, if known)	, a corporation organized under	the laws of the State of
Florida	·	08 9CT SECIVE 108 8CT
		TARY ASSE
,		PH 3: OF ST
Steart	(Signature of resigning officer/director)	non on one

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