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## **COVER LETTER**

Division of Corporation	ıs	
SUBJECT:	(Name of Corporation)	
DOCUMENT NUMBER:	P 0 8 0000 98 221	
The enclosed Officer/Director I	Resignation for a Corporation and fee are su	ibmitted for filing.
Please return all correspondence	ee concerning this matter to the following:	
	m/Company)  69 La	2000 DEC 29 PH 12: SECREMARY B. SANGER FLORE
(City/State ar	•	112: 58 LORIDA

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

TO: Amendment Section

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

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of	CITI Auto (Name of	Corporation)	· · · · · · · · · · · · · · · · · · ·	
<u> Po8</u>	200000000	a corporation organized un	der the laws of the S	State of
	FLORIDA			
		nature of resigning officer/direc	or)	Z000 DEC 29 PH 12: 58

FILING FEE' IS \$35.00

Make checks payable to Florida Department of State and mail to:

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Division of Corporations
P.O. Box 6327
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