

PD9000028973

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

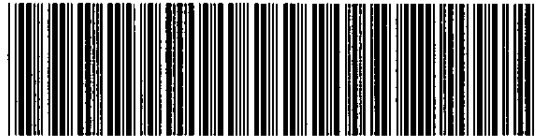
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

09 APR 13 PM 1:53

OD/RES
@ 4.14.09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Street Customz Inc
(Name of Corporation)

DOCUMENT NUMBER: P09000028973

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

Please return all correspondence concerning this matter to the following:

Robert Cerabino
(Name of Person)

STREET CUSTOMZ
(Name of Firm/Company)

240 Power Court
(Address)

Sanford FL 32771
(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES FUENTES at (407) 453-7062
(Name of Person) (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

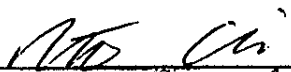
Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Robert Cerafino, hereby resign as CP
(Title)

of Street Customz Inc
(Name of Corporation)

PO9000028973, a corporation organized under the laws of the State of
(Document Number, if known)


(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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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