

P09000092060

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

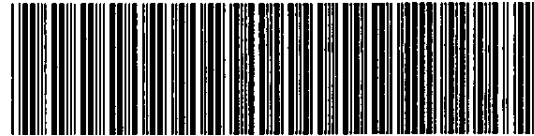
(Business Entity Name)

(Document Number)

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10/07/11--01023--008 \*\*70.00

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OCT - 7 PM 3:29  
SECRETARY OF STATE  
TALLAHASSEE, FL 32399

O/D  
Resign.  
10/11/11  
DK

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** EXTREME AUTO MIAMI, INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P09000092060

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

Please return all correspondence concerning this matter to the following:

JESUS URIARTE  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

10 NW 42 AVE #610  
(Address)

MIA, FL 33126  
(City/State and Zip Code)

For further information concerning this matter, please call:

JESUS URIARTE at ( 305 ) 441-2220  
(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

LAW OFFICES OF

*Jesus Uriarte*

10 N.W. LeJeune Road, Suite 610  
Miami, Florida 33126  
Phone (305) 441-2220 • Telefax (305) 441-1115

October 6, 2011

Dept. of State  
Division of Corporations  
Amendment Section  
Clifton Bldg.  
2661 Executive Center Circle  
Tallahassee, Fl. 32301

RE: Extreme Auto Miami, Inc.

Dear Sir/Madam:

Enclosed please find resignations on above mentioned corporation from Cesar de los Santos and Cesar Pina along with check for \$70.00 to cover your fees.

Yours truly,



JESUS URIARTE, ESQ.

JU/ba

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Cesar de los Santos, hereby resign as President (Title)

of Extreme Auto Miami Inc  
(Name of Corporation)

P09000092060, a corporation organized under the laws of the State of  
(Document Number, if known)

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

**FILED**  
**OCT - 7 PM 3:29**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**