

PO9000095792

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

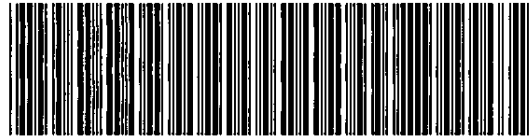
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

10/4/11

OK

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MS TRUCK PARTS AND ACCESSORIES, INC.
(Name of Corporation)

DOCUMENT NUMBER: P09000095792

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

Please return all correspondence concerning this matter to the following:

JUAN M. CRUZ

(Name of Person)

MS TRUCK PARTS AND ACCESSORIES, INC.

(Name of Firm/Company)

11093 NW 138 STREET SUITE 111

(Address)

HIALEAH GARDENS, FLORIDA 33018

(City/State and Zip Code)

For further information concerning this matter, please call:

JUAN M. CRUZ

(Name of Person)

at (786) 444-8243

(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

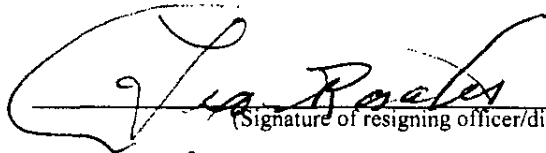
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, LEOVIGILDO ROSALES, hereby resign as VICE-PRESIDENT
(Title)

of MS TRUCK PARTS & ACCESSORIES, INC.
(Name of Corporation)

P09000095792, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILED
11 OCT -3 AM 11:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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