PU900095792

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UI	P WAIT MAIL	
	(Business Entity Name)	
(Document Number)		
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9/2011

COVER LETTER

MS TRUCK PARTS & ACCESSORIES, INC. (Name of Corporation) P09000095792 **DOCUMENT NUMBER:** 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 & ACCESSORIES, INC. (Name of Firm/Company) 11093 N.W. 138th Street, Suite 111 (Address) Hialeah Gardens, Florida 33018 (City/State and Zip Code) For further information concerning this matter, please call: (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

Amendment Section

Post Office Box 6327

Tallahassee, FL 32314

Division of Corporations

CR2E044(08/05)

Street Address:

Clifton Building

Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Leovigildo Rosales	, hereby resign as Vice-President
7	(Title)
of MS TRUCK PARTS & ACCES	
(Name	of Corporation)
P09000095792	, a corporation organized under the laws of the State of
(Document Number, if known)	
FLORIDA	
Leo 3	Signature of resigning officer/director) 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