

P10000024699

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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10 OCT 24 AM 9:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JD  
10/25/10  
TL

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** S.O.S Autoparts INC  
(Name of Corporation)

**DOCUMENT NUMBER:** 710000024699

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

Please return all correspondence concerning this matter to the following:

Daniela Troconis / Patricia Hernanz  
(Name of Person)

S.O.S Autoparts INC  
(Name of Firm/Company)

12550 Biscayne Blvd suite 800  
(Address)

Miami, FL 33181  
(City/State and Zip Code)

For further information concerning this matter, please call:

Patricia Hernanz at (786) 4174604  
(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, Leonardo Castillo, hereby resign as P.V.S.T  
(Title)

of S.O.S Autoparts Inc.  
(Name of Corporation)

P10000024699, 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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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