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(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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SEP 02 2015

R. WHILE

## \* TRANSMITTAL LETTER

SUBJECT: 1St Choice Auto Financing Inc (Name of Corporation)
DOCUMENT NUMBER: P14000059153
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Hayale Cruz (Name of Person)
1St Charce Auto Enching (Name of Firm/Company)
362 Avenue U SW (Address)
Wither Malen FL 33880 (City/State and Zip Code)
For further information concerning this matter, please call:
Steven Stativity at (407) 283 1862 (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
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E044 (05/13)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1 .. 1 4

I, Haydee Cruz, hereby resign as Secretary
Clitte)
of 1St Chorce Auto Fmancing, (Name of Corporation)
P1400059153, a corporation organized under the laws of the State of (Document Number, if known)
Floricla.
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