

P14000068531

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

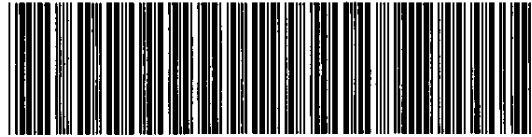
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
MAY - 4 PM 5:31

V HERRING

MAY - 8 2017

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Ancient City Auto Solutions Inc.
(Name of Corporation)

DOCUMENT NUMBER: P14000068531

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

Please return all correspondence concerning this matter to the following:

Christopher Gonzalez
(Name of Person)

(Name of Firm/Company)

5964 Bartram Village Dr
(Address)

Jacksonville, FL. 32258
(City/State and Zip Code)

For further information concerning this matter, please call:

Christopher Gonzalez at 904 345-1930
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

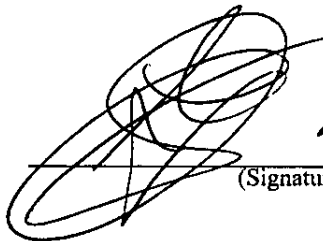
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Christopher Gonzalez, hereby resign as President
(Title)

of Ancient City Auto Solutions Inc.
(Name of Corporation)

P14000068531, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

 4-26-17
(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

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