## P14000074475

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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## TRANSMITTAL LETTER

Amendment Section TO: **Division of Corporations** 

SUBJECT: GOOD MOTORS INC
(Name of Corporation)  DOCUMENT NUMBER: P14000074475
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
MARWAN HAMAD
(Name of Person)
GOOD MOTORS INC
(Name of Firm/Company)
500 S CONGRESS AVE
(Address)
WEST PALM BEACH, FL 33406
(City/State and Zip Code)
For further information concerning this matter, please call:
MARWAN HAMAD (Name of Person)  at (561) 716-8869 (Area Code & Daytime Telephone Number)
(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

ı, MARWAN HA	MAD	, hereby res	sign as VICE F	PRES/SE(Title)	<u>C</u>
of GOOD MOTO					3
	(Name of Corpora	tion)			
P14000074475	, )	oration organ	ized under the laws	of the State of	
(Document Number, if kno	own)	oration organ	izeu unuei uie iaws	of the State of	
FLORIDA				_	
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	(Signature of	f resigning office	cer/director)	可是	8Ú
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## 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