

P14000096838

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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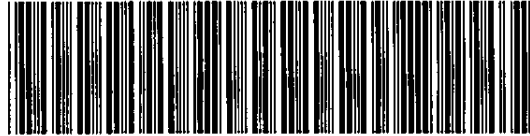
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

APPROVED  
AND  
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*JP*

DEC 30 2014  
T. LEMIEUX

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MOBILE PARTS SOLUTIONS INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P14000096838

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

Please return all correspondence concerning this matter to the following:

DANIEL ALVAREZ  
(Name of Person)

MOBILE PARTS SOLUTIONS INC.  
(Name of Firm/Company)

4640 NW 109TH AVE APT 2209  
(Address)

Doral, Fl. 33178  
(City/State and Zip Code)

For further information concerning this matter, please call:

DANIEL ALVAREZ at (786) 768-0416  
(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, DANIEL ALVAREZ, hereby resign as PRESIDENT  
(Title)

of MOBILE PARTS SOLUTIONS INC.  
(Name of Corporation)

P14 0000 96838, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

**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