## P17000035973

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Ĉi	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
<u>.</u>		

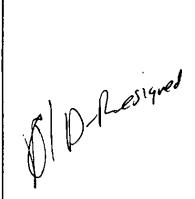




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## TRANSMITTAL LETTER

**TO:** Amendment Section \* Division of Corporations

SUBJECT: JARRETTS AUTO SALES & PARTS CORP
(Name of Corporation)
DOCUMENT NUMBER: P17000035973
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
STEVE LEWIS
(Name of Person)
LCG TAXSHOP INC
(Name of Firm/Company)
10829 NW 27 AVENUE
(Address)
MIAMI, FL. 33167
(City/State and Zip Code)
For further information concerning this matter, please call:
STEVE LEWIS  (Name of Person)  at (305) 769-9333  (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:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301

CR2E044 (05/13)

## • OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

CRAIG A. GRANT hereby resign as VICE PI	RESENT
· · · · · · · · · · · · · · · · · · ·	(Title)
of JARRET S AUTO SALES & PARTS CORI	Р
(Name of Corporation)	<del></del>
P1700035973, a corporation organized under the laws of (Document Number, if known)	f the State of
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

