

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer;	





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1 01D Resign

TRANSMITTAL LETTER

SUBJECT: RED LINE AUTO RECOIR COFF. (Name of Corporation)
DOCUMENT NUMBER: P17000077243
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
KEVIN APONTE. (Name of Person)
REDLINE AUTO REPORT (Orp. (Name of Firm/Company)
18800 WS Highway 19 (Address)
Huclson F1 34667 (City/State and Zip Code)
For further information concerning this matter, please call:
YEVIN APONTE at (910) 587-1595 (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

TO: Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1. KEVIN Apo	THE SECRETARY (Title)
of REDLINE	Auto Repair Corp. (Name of Corporation)
P17000077243 (Document Number, if known	a corporation organized under the laws of the State of
FloriDA	<u></u>
	(orgnature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314