

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6380

From:
Account Name : DEALER CONSULTING SERVICES, INC.
Account Number : I20010000121
Phone : (305)758-9001
Fax Number : (888)501-2390

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: CORPORATIONS@DCSMIAMI.COM

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COR AMND/RESTATE/CORRECT OR O/D RESIGN
MONTE CARLO MOTORSPORT INC

Certificate of Status		0
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **MONTE CARLO MOTORSPORT INC**
(Name of Corporation)

DOCUMENT NUMBER: P18000014998

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

Please return all correspondence concerning this matter to the following:

PAULA RAMIREZ

(Name of Person)

DEALER CONSULTING SERVICES INC.

(Name of Firm/Company)

7537 NW 7TH AVE

(Address)

MIAMI, FL 33150

(City/State and Zip Code)

For further information concerning this matter, please call:

PAULA RAMIREZ

(Name of Person)

at (**305**) **758-9001**

(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

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**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, LUCA LAVIERI, hereby resign as MANAGER
(Title)
of MONTE CARLO MOTORSPORT INC
(Name of Corporation)
P18000014998, a corporation organized under the laws of the State of
(Document Number, if known)
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

SECRET
TALLAHASSEE, FLORIDA

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