P18000043253

(Re	equestor's Name)	
, ,	•	
(Ac	ldress)	
(Ac	ldress)	
	(0) (7)	
(Ci	ty/State/Zip/Phone #	*)
PICK-UP	☐ WAIT	MAIL
(D)	isiness Entity Name	
(Bu	isiness Endry Name	7
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	Ì
		1
		1
		İ
<u> </u>		

Office Use Only



500340596625

02/18/20--01006--021 **35.00

2020 FEB 18 AM 9: 12

ISION OF CORPORATION



TRANSMITTAL LETTER

Insurance Quality Parts, Inc. **SUBJECT:** (Name of Corporation) DOCUMENT NUMBER: The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Natalie Serpa (Name of Person) Insurance Quality Parts, Inc. (Name of Firm/Company) 3601 NW 55th Street, Unit 104 (Address) Miami, FL 33142 (City/State and Zip Code) For further information concerning this matter, please call: Natalie Serpa Enclosed is a check for \$35.00 made payable to the Florida Department of State. Mailing Address: Street Address: Amendment Section Amendment Section **Division of Corporations** Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Natalie Serpa I,	President , hereby resign as
1,	, hereby resign as(Title)
Insurance Quality Parts, Inc.	
	(Name of Corporation)
P18000043253	a corporation organized under the laws of the State of
(Document Number, if know	\overline{n}
Florida	
	·
Mara	(Signature of resigning officer/director)
	(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