

P130000 81874

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

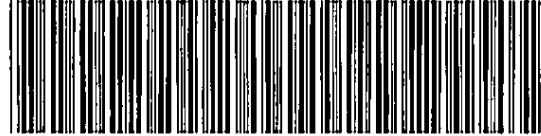
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000331394940

07/11/19--01012--015 \*\*35.00

JUL 20 2019

S. YOUNG

FILED

19 JUL 11 PM 7:08

CLERK OF SUPERIOR COURT  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ABR MOTORSPORT INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P18000081874

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

Please return all correspondence concerning this matter to the following:

SAMMY S RAFRAF

(Name of Person)

ABR MOTORSPORT INC

(Name of Firm/Company)

13518 N FLORIDA AVE

(Address)

TAMPA FL 33613

(City/State and Zip Code)

For further information concerning this matter, please call:

SAMMY S RAFRAF at (727) 557-9431  
(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

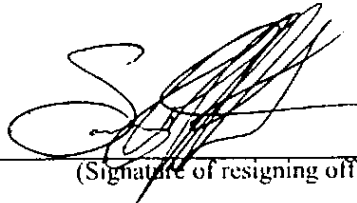
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, SAMMY S RAFRAF, hereby resign as PRESIDENT  
(Title)

of ABR MOTORSPORT INC  
(Name of Corporation)

P18000081874, 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

FILED  
19 JUL 11 PM 7:08  
TALLAHASSEE, FLORIDA