

P20 0000 19475

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

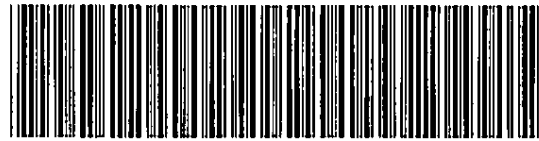
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

JQ 10/29/20

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: HORSEPOWER BODY SHOP CORP.
(Name of Corporation)

DOCUMENT NUMBER: P200000019475

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

Please return all correspondence concerning this matter to the following:

VICTOR ROMERO
(Name of Person)

HORSEPOWER BODY SHOP CORP
(Name of Firm/Company)

9441 FONTAINEBLEAU BLVD A. 214
(Address)

MIAMI, FL. 33172
(City/State and Zip Code)

For further information concerning this matter, please call:

VICTOR ROMERO at (786) 439-5286
(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, VICTOR ROMERO, hereby resign as VP
(Title)

of HORSEPOWER BODY SHOP CORP
(Name of Corporation)

P20000019475, 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

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