

P21000076370

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

From: Account Name : PADRON AND ASSOCIATES INC.
Account Number : I20060000156
Phone : (305)818-0404
Fax Number : (305)818-0898

2021 NOV 17 PM 4:53

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

Email Address: _____

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
MPS AUTO BODY CORP.**

Certificate of Status	0
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Page Count	03
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ALBRITTON

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MPS AUTO BODY CORP.

(Name of Corporation)

DOCUMENT NUMBER: P21000076370

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

RALPH PADRON

(Name of Person)

PADRON & ASSOCIATES, INC.

(Name of Firm/Company)

2095 W 76TH ST - SUITE 102

(Address)

HAIALEAH, FL 33016

(City/State and Zip Code)

For further information concerning this matter, please call:

RALPH PADRON at (305) 818-0414

(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:

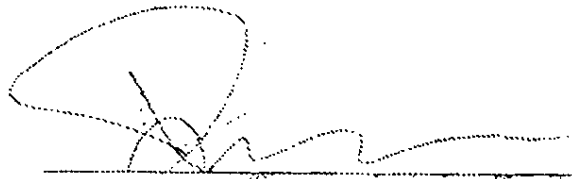
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, ARAVENA, RICARDO, hereby resign as VPD
(Title)

of MPS AUTO BODY CORP.
(Name of Corporation)

P21000076370 a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA


(Signature of resigning officer/director)

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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