

P92000011433

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

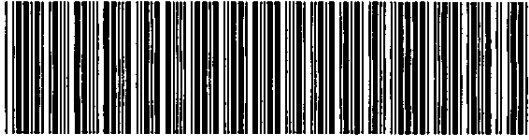
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800267253198

.12/17/14--01021--012 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 DEC 17 PM 12:39

C.L.
12-23-14

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: COMPLETE CAR CARE OF PINELLAS
(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:

JAMES TERRY

(Name of Person)

COMPLETE CAR CARE OF PINELLAS

(Name of Firm/Company)

2255 STARKEY RD UNIT 1

(Address)

LARGO FLORIDA 33771

(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES TERRY

(Name of Person)

at (⁷²⁷⁻⁵³⁶⁻²³²²)

(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**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS


14 DEC 17 PM 12:40

I, JAMES TERRY, hereby resign as PRESIDENT
(Title)

of COMPLETE CAR CARE OF PINELLAS INC
(Name of Corporation)

P92000011433 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