P94000030918

(Requ	uestor's Name)	
(Addr	ress)	
(Addi	ress)	
(City/	State/Zip/Phon	ne #)
PICK-UP	WAIT	MAIL
(Busi	ness Entity Na	me)
(Doc	ument Number)
Certified Copies	Certificate	s of Status
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I ALBRITTON

TRANSMITTAL LETTER

SUBJECT: KISSIMMER ANTO SALVAGE FOR (Name of Corporation)

DOCUMENT NUMBER: P9400030918

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

MANUAL DE SESUS
(Name of Person)

KISSIMMER ANTO SALVAGE FOR (Name of Firm/Company)

1400 HARRISON LANE (Address)

KISSIMMER FL 34744
(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person)

(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

TO:

Amendment Section Division of Corporations

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301



December 15, 2016

MANUEL DE JUSUS KISSIMMEE AUTO SALVAGE INC 1400 HARRELSON LANE KISSIMMEE, FL 34741

SUBJECT: KISSIMMEE AUTO SALVAGE, INC

Ref. Number: P94000030918

We have received your document for KISSIMMEE AUTO SALVAGE, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 516A00026728

Irene Albritton Regulatory Specialist II

www.sunbiz.org

Constitute D.O. DOY COOR M. H. L. C. Electrone

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, TEEK PERSAUD, hereby resign as 7	(Title)
of KISSIMPEE AVIO SALVAGE (Name of Corporation) P94000030918, a corporation organized under the laws of Corporation (Document Number, if known)	TWC.
(Document Number, if known) FLORTDA	
(Signature of resigning officer/director)	
	2: Oh

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