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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: LINDO AUTO REPAIRS AND SALES, INC.
(Name of Corporation)
DOCUMENT NUMBER: P94000052419
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
RICHARD BOYD
(Name of Person)
LINDO AUTO REPAIRS AND SALES, INC.
(Name of Firm/Company)
2550 ALI BABA AVENUE
, (Address)
OPA LOCKA, FL 33054
(City/State and Zip Code)
For further information concerning this matter, please call:
RICHARD BOYD at (786) 286 5302. (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
*
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Fallahassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, KEITH LINDO	, hereby resign as President/Director/Secretary/Pr	easurer
of_ LINDO AUTO REPAIRS AND (Name	SALES, INC . of Corporation)	
P94000052419 (Document Number, if known)	_, a corporation organized under the laws of the State of	
FLORIDA	_·	
Se de la constant de	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