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SECRETARY OF STAIL
TALLAHASSEE, FLORIDA

Office Resign Cris Murphy 2/20/08

COVER LETTER

White Glove Auto Reconditioning & Sales, Inc. (Name of Corporation) P96000015483 **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: **Kelly Staso** (Name of Person) (Name of Firm/Company) P.O.Box 971312 (Address) Boca Raton, FL 33497 (City/State and Zip Code) For further information concerning this matter, please call: Kelly Staso 561 809-3606 (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Street Address: **Mailing Address:** Amendment Section **Amendment Section** Division of Corporations **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Post Office Box 6327 Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Kelly Staso	, hereby resign as Officer (OVP)	
	(Title)	
of White Glove Auto Reco	onditioning & Sales, Inc.	
P96000015483 (Document Number, if know	(Name of Corporation) , a corporation organized under the laws of the State of	
Florida		
	08 FEB: 4 SCORETARY ALLAHASSE	
	(Signature of resigning officer/director) SEE STATE OF S	

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