

P96000094201

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

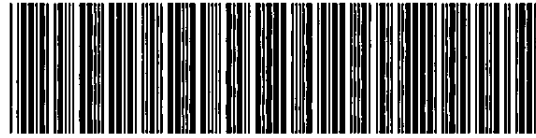
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

TS
6/26/07

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AUTO CITY USA INC
(Name of Corporation)

DOCUMENT NUMBER: P96000094201

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

OSVALDO M. LAPIDO
(Name of Person)

AUTO CITY USA INC
(Name of Firm/Company)

505 EVINE ST
(Address)

KISSIMEE FL 34744
(City/State and Zip Code)

For further information concerning this matter, please call:

OSVALDO M. LAPIDO at (828) 552-0599
(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
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

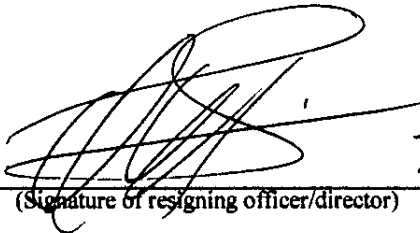
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, OSUALDO M. LAPIDO, hereby resign as VICE-PRESIDENT
(Title)

of AUTO CITY U.S.A. INC.
(Name of Corporation)

P96000094201, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


7-18-07
(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

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TALLAHASSEE FLORIDA