

P98000030090

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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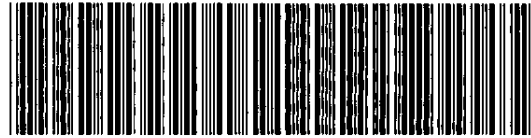
(Business Entity Name)

(Document Number)

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10 JUL 27 PM 1:33
TALLAHASSEE FLORIDA

note 7/27/10
02/27/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Strickland Automotive Inc
(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:

Ryan L Strickland

(Name of Person)

Strickland Automotive Inc

(Name of Firm/Company)

920 Silkwood Ct

(Address)

Longwood, Fl. 32750

(City/State and Zip Code)

For further information concerning this matter, please call:

Ryan Strickland

(Name of Person)

at (407) 222-7926

(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

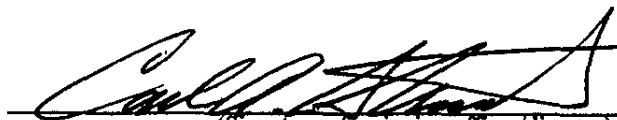
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Carl A Strickland Sr, hereby resign as Director
(Title)

of Strickland Automotive, Inc.
(Name of Corporation)

_____, 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

FILED
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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314