P99000039316

| (Re | questor's Name) | |
|---------------------------|-------------------|-------------|
| (Ad- | dress) | |
| _ (Ad | dress) | |
| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
| | | |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to I | Filing Officer: | |
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Office Use Only



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EXAMINER

COVER LETTER

South Florida Auto Terminal (Name of Corporation) P99000039316 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: **Grant Murray Armstrong** (Name of Person) South Florida Auto Terminal Inc. (Name of Firm/Company) 901 Old Griffin Road (Address) Dania Beach FL 33004 (City/State and Zip Code) For further information concerning this matter, please call: (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 Post Office Box 6327 2661 Executive Center Circle Tallahassee, FL 32301 Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| I. Grant Murray Armstrong | , hereby resign as Director/Officer | |
|----------------------------|--|--|
| | (Title) | |
| of South Florida Auto Term | inal Inc | |
| | (Name of Corporation) | |
| P99000039316 | , 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

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

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