SIIdd

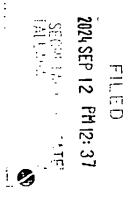
| (Requestor's Name) | | | | | |
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| (City/State/Zip/Phone #) | | | | | |
| PICK-UP WAIT MAIL | | | | | |
| | | | | | |
| | | | | | |
| (Business Entity Name) | | | | | |
| | | | | | |
| | | | | | |
| (Document Number) | | | | | |
| | | | | | |
| Certified Copies Certificates of Status | | | | | |
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| Special Instructions to Filing Officer. | | | | | |
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Office Use Only



100436196661

09/12/24---01017--020 **35.00



OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| ſ, <u> </u> | HETRITOTANAM, hereby resign as VICE | Pres | dert | |
|-------------|------------------------------------------------------------------------------------------------|------------|---------------------------|-------|
| of | St Cloud Auto Salvage, Inc | (Ti | tlě) | |
| S | (Name of Corporation) Name of Corporation) Occument Number, if known) (Name of Corporation) | iws of the | State of | |
| F | Touch | | | |
| | | 1 | 2024 SEP SEGRE! | ! |
| | (Signature of resigning officer/director) | 1.0 | 7 | FILED |
| | | | PH 12: 37 | D |
| | | 9 | : ~ | |

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