## 192699

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
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SECRETARY OF STATE
TALLAHASSEE, FI DBIR.

Mesign

## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUB.	JECT: Toucan Willies,Inc.
	(Name of Corporation)
DOC	CUMENT NUMBER: L92699
The e	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Pleas	e return all correspondence concerning this matter to the following:
Chri	istopher M. Cascio
	(Name of Person)
	(Name of Firm/Company)
463	9 Tiffany Woods Circle
	(Address)
Ovi	edo, Florida 32765
	(City/State and Zip Code)
For fi	urther information concerning this matter, please call:
Chris	s Cascio at ( 407 ) 766-3792 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	osed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divis Clifto 2661	Mailing Address: Amendment Section Amendment Section Division of Corporations On Building Executive Center Circle hassee, FL 32301  Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. Christopher M. Cascio	, hereby resign as President	
	(Title)	
of Toucan Willies, Inc.	EFFECTIVE 12/31/07	
(Na	me of Corporation)	
L92699	, 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: RIATE

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