

P00000010598

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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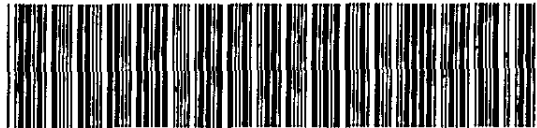
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: T & S LIMITED, INC. / DBA Roll Off SOLUTIONS
(Name of Corporation)

DOCUMENT NUMBER: P00000010598

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

Please return all correspondence concerning this matter to the following:

GUILIO PICCINONNA

(Name of Person)

T & S LIMITED, INC. / DBA Roll Off SOLUTIONS
(Name of Firm/Company)

2402 SW 57 TERRACE

(Address)

HOLLYWOOD, FL 33023

(City/State and Zip Code)

For further information concerning this matter, please call:

GUILIO PICCINONNA at (954) 894-6240
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, GUILIO PICCINONNA, hereby resign as PRESIDENT
(Title)

of T & S LIMITED, INC. / SBA ROLL OFF SOLUTIONS,
(Name of Corporation)

P00000010598, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.


(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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