

P00000025635

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

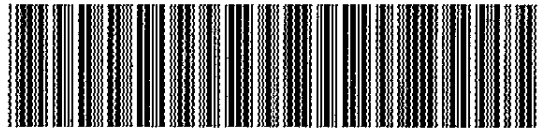
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TECH WOOD CABINETS INC.

(Name of Corporation)

DOCUMENT NUMBER: P00000025635

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

Please return all correspondence concerning this matter to the following:

JUAN P. SANCHEZ

(Name of Person)

(Name of Firm/Company)

5350 NW 183RD STREET

(Address)

MIAMI FLORIDA 33055

(City/State and Zip Code)

For further information concerning this matter, please call:

JUAN P. SANCHEZ

(Name of Person)

at (305) 450-4239

(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

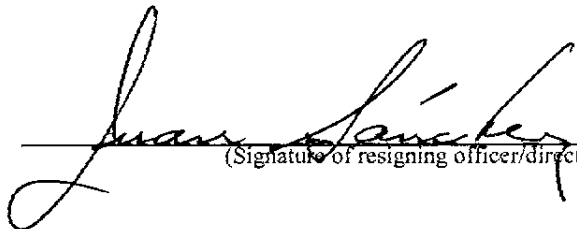
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, JUAN P. SANCHEZ, hereby resign as President, Vice President, Secretary
(Title) & Treasurer

of TECH WOOD CABINETS INC.
(Name of Corporation)

P00000025635, 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

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