

P00000113231

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

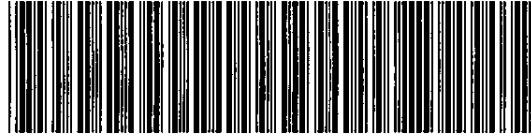
(Business Entity Name)

(Document Number)

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JAN 15 2016

R. WHITE

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16 JAN 11 PM 4:55  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** A.I.W., Inc.

(Name of Corporation)

**DOCUMENT NUMBER:** P000000113231

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

Please return all correspondence concerning this matter to the following:

Maura Vespie

(Name of Person)

A.I.W., Inc.

(Name of Firm/Company)

1800 Pembroke Drive Suite 300

(Address)

Orlando, FL 32810

(City/State and Zip Code)

For further information concerning this matter, please call:

Krista S. Gates

(Name of Person)

at ( 407 ) 521-4576

(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, Keri Coladarci, hereby resign as Chief Financial Officer  
(Title)

of A.I.W., Inc.  
(Name of Corporation)

P00000113231, 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

**FILED**  
**16 JAN 11 PM 4:55**  
**SECRETARY OF STATE**  
**TALLAHASSEE FLORIDA**