

P00423

See attached

Requestor's Name

Address

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input checked="" type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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-12/01/98--01015--018
*****35.00 *****35.00

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
98 NOV 30 PM 2:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 7 1998

Examiner's Initials

TLL

CT CORPORATION SYSTEM

November 18, 1998

1633 Broadway
New York, NY 10019
Tel. 212 246 5070

AMC MECHANICAL OF FLORIDA, INC.	(AL. DOM.)
RE: TOUR AND INCENTIVE MANAGEMENT CORPORATION	(DE. DOM.)
TOY WAREHOUSE, INC.	(FL. DOM.)
TRANSPORTATION TELEPROCESSING SYSTEMS, INC.	(FL. DOM.)
TRI-GULF SHIPPING INTERNATIONAL CORP.	(TX. DOM.)
TURTLE CREEK MANAGEMENT INC.	(IN. DOM.)

Secretary of State
Corporate Records Bureau
Division of Corporations
409 East Gaines Street
Tallahassee Fl. 32399

Dear Sir:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed are 6 checks in the amount of \$35.00 each to cover the required filing fee.

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclose a stamped self-addressed envelope.

Very truly yours,

CT CORPORATION SYSTEM

Theresa Alfieri

Theresa Alfieri *ah*
Senior Supervisor &
Assistant Secretary

TA: il
enclosure



Florida Department of State, Jim Smith, Secretary of State

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2) or 607.1509, Florida Statutes, the

undersigned, C T CORPORATION SYSTEM hereby resigns as
(name of registered agent)

Registered Agent for TURTLE CREEK MANAGEMENT INC.
(name of corporation)

ORGANIZED UNDER THE LAWS OF THE STATE OF INDIANA

A copy of this resignation was mailed to the above listed corporation at its last known address. c/o Columbia Hospital Corporation
201 W., Main Street
Louisville, Ky. 40202-1366

The agency is terminated and the office discontinued on the 31st day after the date on which the statement was filed.


SIGNATURE
ASSISTANT SECRETARY

FEE FOR FILING THIS DOCUMENT:

\$87.50-Active Corporation

\$35.00-Administratively Dissolved Corporation