(Re	equestor's Name)	 -
(Ac	idress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phon	e #)
_		
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer	 -
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officer Resignation

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: TURN MAINTENANCE SERVICES, INC
(Name of Corporation)
DOCUMENT NUMBER: P02000045469
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filin
Please return all correspondence concerning this matter to the following:
JOSEPH D ESPOSITO
(Name of Person)
TURN MAINTENANCE SERVICES, INC
(Name of Firm/Company)
PO BOX 700722
(Address)
ST CLOUD, FL 34770-0722
(City/State and Zip Code)
For further information concerning this matter, please call:
DEE MCCLINTOCK at (407) 892-8527 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

OFFICER	/ DIRECTOR RESIGNATION "
FC	OR A CORPORATION
I. WALLACE MCCOMMON	hereby resign as VICE PRESIDENT (Title)
of TURN MAINTENANCE SER	1
(Nam	e of Corporation)
P02000045469 (Document Number, if known)	, a corporation organized under the laws of the State of
FI ORIDA	

(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