## P030000 27529

(Re	equestor's Name)						
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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporation	ns	<del>-</del>
SUBJECT: TRIST.	AR PLUMBING, INC.	
	(Name of Corporat	on)
DOCUMENT NUMBER:	P030000275	29
The enclosed Resignation of R	egistered Agent for a Corpora	ation and fee are submitted for filing.
Please return all correspondence	ce concerning this matter to the	ne following:
DARREN E. WOODS		
(Name o	Person)	·
(Name of Fir	m/Company)	
10151 University 1	Blvd. #341	
(Add	ress)	. :
Orlando, FL 32817		
(City/State an	nd Zip Code)	
For further information concern	ning this matter, please call:	
DARREN E. WOODS	of ( 407	383-3581
(Name of Person	) (Area Code	383-3581 & Daytime Telephone Number)
Enclosed is a check made paya or \$35.00 for an administrative	ble to the Florida Department ly dissolved, voluntarily disso	t of State for \$87.50 for an active corporation olved or withdrawn corporation.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporation 409 E. Gaines Street Tallahassee, FL 32399	

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2),	61/1	1502(2), 607.150	19, or 617.1509,	
Florida Statutes, the undersigned,	DARREN				
	(Name of Registered Agent)				
hereby resigns as Registered Agent for	TRI S		PLUMBING,		
, , , , , , , , , , , , , , , , , , , ,	(Name of Corporation)			<b>-</b>	
P03000027529					, <u></u>
(Document Number, if known)					, <del>-</del>
A copy of this resignation was mailed to	o the above	listed	corporation at i	ts last known addre	ss.
The agency is terminated and the office this statement is filed.	discontinue			er the date on which	BI MOF TO
If signing on behalf of an entity:	-			FLORID	ED 33.88
	Typed or Print	ed Na	ne)		* 1
	(Capaci	ty)		<del></del>	· · · · · · ·

## Fee for filing this document:

\$87.50 - Active corporation
\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314