P03000101379

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(org/outed lip) Hone wy
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
İ

Office Use Only



400026463764

01/20/04-01020--U13 **35.00



EORETAN 1 OF STATE

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Toor + Company, Inc. (Name of Corporation) DOCUMENT NUMBER: PO 3000 101379
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Amy W. Schrader (Name of Person)
Huey Guilday Law Firm (Name of Firm/Company)
P.O. Box 12500 (Address)
Tallahassee, FC 32317 (City/State and Zip Code)
For further information concerning this matter, please call:
Arry W. Schrader at (850) 224-7091 (Name of Person) at (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 F/	1 ~
FOR A CORPORATION 04 ///	LED
TALLAHASSEL	LED O PM 4:51
I, Zulfigar Ali hereby resign as Directo	(Title)
of Toor + Company, Inc. (Name of Corporation)	(Tine)
PO 3000 101379, a corporation organized under the laws (Document Number, if known)	of the State of
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