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officer Resignation

TB 12.5-08

## **COVER LETTER**

Division of Corporations
SUBJECT: TAY OR CUSTOM CABINETRY, INC (Name of Corporation)
DOCUMENT NUMBER: \$\int 0 4 000 0 40 359
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Pobert T. Clingar (Name of Person)
Try Of Custom Cabinetry (Name of Firm/Company)
3960 Priserve WAJ
ESTERO F 1 33928 ." (City/State and Zip Code)
For further information concerning this matter, please call:
Robert Clingan at (239) 9.40-305) (Name of Person) O (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
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

TO:

Amendment Section

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, TAMARA	Clingan, hereby resign as Vice	Prosident (Title)
of TAylor (	USTOM CA biretry, I	41C.
POU 0000 40 3 5 (Document Number, if)	, a corporation organized under the laws	of the State of
	<del></del> ·	ZIBBREC SECRE
	•	C-3 PH
	Jamasa Z. Clingan (Signature of resigning officer/director)	1:59 FFLORIE

## 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