

PD4000149904

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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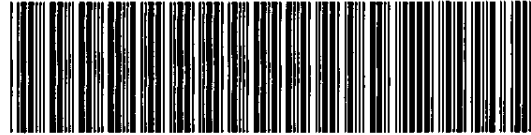
(Business Entity Name)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: K.T.W. & Associates, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P04000149904

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Yolanda Schaefer
(Name of Person)

N/A
(Name of Firm/Company)

11205 SW 134 Ter.
(Address)

Miami, Fl. 33176
(City/State and Zip Code)

For further information concerning this matter, please call:

Yolanda Schaefer at (305) 297-7314
(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
Tallahassee, FL 32301

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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Yolanda Schaefer, hereby resign as Director
(Title)

of K.T.W. & Associates, Inc.
(Name of Corporation)

P04000149904, a corporation organized under the laws of the State of
(Document Number, if known)
Florida.


(Signature of resigning officer/director)

FILING FEE IS \$35.00

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DIVISION OF CORPORATIONS
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Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314