(Re	equestor's Name)	
(Ad	dress)	
(Ad	idress)	
(Cil	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: W.D. TRIM, INC.	
	(Name of Corporation)
DOCUMENT NUMBER: P050	000061395
The enclosed Officer/Director Resig	gnation for a Corporation and fee are submitted for filing
Please return all correspondence co	ncerning this matter to the following:
WILLIAM D MCCOWAN	
(Name of Pers	on)
WD TRIM, INC.	
(Name of Firm/Co	mpany)
118 WHITE OAK TRAIL	
· · · (Address)	
SATSUMA, FL. 32189	
(City/State and Zi	Code)
For further information concerning	this matter, please call:
LISA WIGGINS	at (386) 328-4164 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made	e 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, JOSEPH R SEBULSKI	, hereby resign as VICE PRESIDENT	
	(Title)	
of_ WD TRIM, INC.		
(Name o	f Corporation)	
P05000061395 (Document Number, if known)	, a corporation organized under the laws of the State of	
FLORIDA	<u>.</u>	
P Joseph (Si	Al Sebulski gnature 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