P05000090321

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Mr Spor

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: TIMESHARES R US INC

(Name of Corporation)

DOCUMENT NUMBER: P05000090321

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MONICA ZIMMER LAWSON

(Name of Person)

ZIMMER ACCOUNTING SERV INC

(Name of Firm/Company)

2403 W STATE STREET

(Address)

TAMPA FL 33609

(City/State and Zip Code)

For further information concerning this matter, please call:

MONICA Z LAWSON

,,,813 \354-8301

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.	
Florida Statutes, the undersigned, ZIMMER & LAWSON ACCOUNTING S	ERVICE
(Name of Registered Agent)	
hereby resigns as Registered Agent for TIMESHARES R US INC	
(Name of Corporation)	<u> </u>
P05000090321	
(Document Number, if known)	
(=	
A copy of this resignation was mailed to the above listed corporation at its last kno	wn address.
The agency is terminated and the office discontinued on the 31st day after the date this statement is filed.	on which
Maura ZSausan (Signature of Resigning Agent)	
(Signature of Resigning Agent)	
If signing on behalf of an entity:	<u>ं</u> ट
Monica Z LAWSON (Typed or Printed Name)	SEP 13
(Typed or Printed Name)	ω
	2 5
Per	112 N
(Capacity)	5

Fee for filing this document: \$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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