P05000123661

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(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
•		
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	cument Number)	_
Certified Copies	_ Certificates	s of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO:	Amendment Section Division of Corporations
SUB	JECT: TIGHT WORK TIRES AND WHEELS, INC.
	(Name of Corporation)
DOG	CUMENT NUMBER: P05000123661
The	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Pleas	se return all correspondence concerning this matter to the following:
LIT	Z I HENDERSHOT
	(Name of Person)
TIC	SHT WORK TIRES AND WHEELS, INC.
	(Name of Firm/Company)
525	50 SOUTH US 1
	(Address)
FO	RT PIERCE, FL 34982
	(City/State and Zip Code)
For f	further information concerning this matter, please call:
LITZ	Z I HENDERSHOT at (772) 595-3770 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Encl	osed is a check for \$35.00 made payable to the Florida Department of State.
Ame Divis Clifte 2661	et Address: Indment Section Sion of Corporations On Building Executive Center Circle Shassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED

06 AUG 23 AM 8: 20

SECRETARY OF STATE
TALLAHASSEE. FLORIDA

I, LITZ I HENDERSHOT	, hereby resign as TREASURER
	(Title)
of_TIGHT WORK TIRES AND WHEE	•
(Name of Cor	poration)
P05000123661 , a c	corporation organized under the laws of the State of
FLORIDA .	
Signature (Signature)	re 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