## P06000066291

(Re	equestor's Name)	<u> </u>
(Ad	dress)	
(Ad	dress)	
· . (Cit	ry/State/Zip/Phone	e #)
	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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-07 DEC 17 PM 2:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Officer Resign Cris Murphy 12/19/07

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: TROPICAL WIRELESS, FAC. (Name of Corporation)
DOCUMENT NUMBER: \$\int 0600066291\$
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Person)
TRUPICAL WIRELESS, Inc. (Name of Firm/Company)
14942 TAMIANI TRAIL (Address)
MORTH DORT FZ 342F7 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (941) 270-2845 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Scott M. Inthak hereby resign as MESIDENT	le)
of TROPICAC DIRETES Inc. (Name of Corporation)	······································
Pob00066291, a corporation organized under the laws of the (Document Number, if known)	State of
honisa.	
(Signadure of resigning officer/director)	FILED  07 DEC 17 PM 2: 58  SCCRETARY OF STALE TALLAHASSEE, FLORIDA

**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