P0700044199

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
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SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Trim Limousine Inc (Name of Corporation) DOCUMENT NUMBER: PO 700044199
DOCUMENT NUMBER: 10700044199
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)
Trim Lim OUSINE, Inc (Name of Firm/Company)
3752 LAMAR CT (Address)
PALM HAR BOR F1 34684 (City/State and Zip Code)
For further information concerning this matter, please call: $ \frac{\text{Sren} + \text{Agin}}{\text{(Name of Person)}} \text{ at } (\frac{727}{\text{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,	Dou Pier	RLE	, hereby resign a	s Presiden	Title)	
of	Trim	L, m aus 11 (Name of Corr	WE, Inc		,	
	P070004 (Document Number, if	4199 , a co	orporation organized u	under the laws of th	e State of	
		•				
		(Signatur	re of resigning officer/dire	ector)	ZOOB AUG 18 SECRETAR TALLAHASS	
					8 PH 2: 36 RY OF STATE A SSEE, FLORIDA	M

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

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