

PO7000044199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

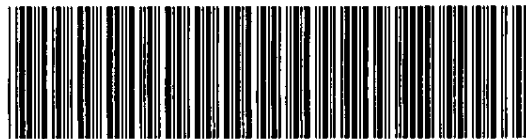
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900244491279

02/12/13--01015--011 **70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 FEB 12 PM 2:55

off. Res.

FEB 14 2013

T. BROWN

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Trim Limousine, Inc
(Name of Corporation)

DOCUMENT NUMBER: ~~PO~~ PO 70000 44199

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SARAH JONES
(Name of Person)

(Name of Firm/Company)

2540 ANDERSON DR
(Address)

CLEARWATER, FL 33761
(City/State and Zip Code)

For further information concerning this matter, please call:

Brent Agin at (727) 423 8466
(Name of Person) (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
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

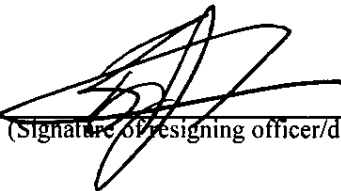
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 FEB 12 PM 2:55

I, Brent AG IN M.D., hereby resign as DIRECTOR/PRES.
(Title)

of Trim Limousine, Inc.
(Name of Corporation)

P07000044199, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.


(Signature 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