

PO7000070904

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

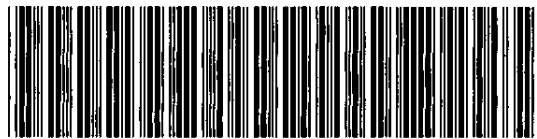
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000113200820

12/21/07--01016--014 **35.00

07 DEC 21 AM 11:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Office Design
Cris Murphy
12/26/07

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TWC, INC
(Name of Corporation)

DOCUMENT NUMBER: P07000070904

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

Please return all correspondence concerning this matter to the following:

MARIA S.QUIROZ
(Name of Person)

TWC, INC
(Name of Firm/Company)

517 S.CHICKASAW TRAIL
(Address)

ORLANDO FL 32825
(City/State and Zip Code)

For further information concerning this matter, please call:

MARIA S.QUIROZ at (407) 218 4145
(Name of Person) (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, TRINA UZCATEGUI, hereby resign as VICEPRESIDENT
(Title)

of TWC, INC.
(Name of Corporation)

P07000070904, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILED
07 DEC 21 AM 11:59
SECRETARY OF STATE
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