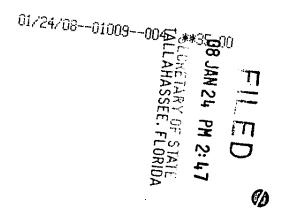
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(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		,

Office Use Only



800115756208



Office Resign Erin Murphy 2/1/08

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: TWT Salan Services TNC (Name of Corporation)
DOCUMENT NUMBER: PO 7000134672
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Thomas Marsthall ar Tammy Marstall (Name of Person)
TNT SAION Services INC (Name of Firm/Company)
495 NE. 4th Street Suites (Address)
DelRAY BUACH FT 33483 (City/State and Zip Code)
For further information concerning this matter, please call:
1 Armmy Mars Hall at (501) 265-3725 (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

Thomas Marshall, hereby resign as Vice. P	resident
(Name of Corporation) Services, INC.	·
(Document Number, if known), a corporation organized under the laws of the	State of
Florida	
(Signature of resigning officer/director)	FILED 08 JAN 24 PM 2: 47 TÄLLAHASSEE, FLORIDA
	(Name of Corporation) PO 7000 134072 , a corporation organized under the laws of the (Document Number, if known) Flored A

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