

(Requestor's Name)
(Address)
(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:

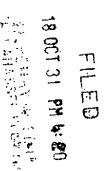
Office Use Only



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11/02/18--01024--002 \*\*35.00

S TALLENT NOV 0 5 2018



M Resigned

## TRANSMITTAL LETTER

Division of Corporations		
TINNGOM PLUMBING CC	)RP	
SUBJECT:	(Name of Cor	poration)
DOCUMENT NUMBER: P180000775	3 	
The enclosed Officer/Director Resignation	i for a Corpora	tion and fee are submitted for filing
Please return all correspondence concerning	ng this matter to	o the following:
Terrence James Malloy		
(Name of Person)		<u> </u>
Tinngom Plumbing Corp		
(Name of Firm/Company	)	<del></del>
4603 SW 105th Drive		
(Address)		
Gainesville , FL 32608		
(City/State and Zip Code	) .	
For further information concerning this ma	atter, please ca	II:
Terrence Malloy	352	505-5047
(Name of Person)	(Area (	) Code & Daytime Telephone Number)
E 1 1: 1 1 C #2500 1	(1) 191 4	1.15

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section

TO:

Amendment Section

Division of Corporations P.O. Box 6327 Fallahassee, FL 32314

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

Lec-10/31/18

CR2E044 (05/13)

(DVER)

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Terrence James Malloy	CEO
ī,	, hereby resign as
	, hereby resign as (Title)
TINNGOM PLUMBING CORP	
of(Nam	e of Corporation)
	c of Corporation,
P18000077753	. a corporation organized under the laws of the State of
(Document Number, if known)	
FLORIDA	
	<u></u> .
Learne	Jones Malley (Signature of resigning officer/director)
	(Signature of resigning officer/director)
	E T

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