P2000041675

(Requestor's Name)
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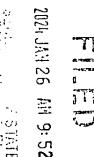
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COVER LETTER

TO: Amendment Section Division of Corporations
TWINSAA CORP SUBJECT:
(Name of Corporation)
DOCUMENT NUMBER: P20000041675
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
GUSTAVO ROCHA DOS SANTOS BRASIL
(Name of Person)
(Name of Firm/Company)
8966 MAJESTY PALM ROAD
(Address)
KISSIMMEE, FL 34747
(City/State and Zip Code)
For further information concerning this matter, please call:
GUSTAVO ROCHA DOS SANTOS BRASIL at ()
(Name of Person) at () (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sec	ctions 607.0503(2), 617.0502(2), 607.1509,	, or 617	.1509,	
Florida Statutes, the undersigned	d, LARSON ACCOUNTING GROUP	Q.	20	
,	(Name of Registered Ager	it)====	20 ⁶ JAN	
hereby resigns as Registered Age	ent for TWINSAA CORP	<u>-</u> :	- <u> </u>	3.220
D20000011775	(Name of Corporation)		92	4 1 8 7
P20000041675				
(Document Number, if known)	्रीटः सम्बद्ध	က် က်	عريبة
A convert this regionation was m	nailed to the above listed corporation at its	lact kno		drace
recopy of this resignation was if	inned to the above fisted corporation at its	iust kiid	, wii aa	arcss
this statement is filed.	Cardlaga .	<u>.</u>		
	(Signature of Resigning Agent)			
If signing on behalf of an entity:				
CAROLINE LAR	SON			
 	(Typed or Printed Name)			
CEO				
	(Capacity)			

Fee for filing this document:

\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314