P22000026432

(Red	questor's Name)			
(Add	dress)			
·	dress)			
(City	//State/Zip/Phone	∍#)		
PICK-UP	MAIT	MAIL		
(Bus	siness Entity Nan	ne)		
		- · · · · · · · · · · · · · · · · · · ·		
(Doc	tument Number)			
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				





200414993422

09/01/23--01020--008 **35.00

TRANSMITTAL LETTER

TO:	Amendment Section
	Division of Corporations

SUBJECT:	TOWN CONNECT NETWORK INC			
5000EC1	(Name of C	Corporation)		
DOCUMENT NUMBER:	P22000026432			
The enclosed Officer/Director	Resignation for a Corpo	oration and fee are submitte	ed for filing.	
Please return all corresponden	ce concerning this matte	r to the following:		
LAZARO A REYES JAIME				
(Name o	of Person)			
TOWN CONNECT NETWORK IN	IC			
(Name of Fi	rm/Company)			
7602 TALL TREE CT				
(Add	iress)			
PORT RICHEY, FL 34668				
(City/State a	ind Zip Code)	_		
For further information concer	ming this matter, please of	call:		
LAZARO A REYES JAIME	503	720-6135		
(Name of Perso	n) (Arca	a Code & Daytime Telephon	e Number)	
Enclosed is a check for \$35.00	made payable to the Flo	orida Department of State.		

Malling 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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

LEPSY A GUZMAN JAIM	IE, hereby resign as	TREASURER
	, nereby resign as	(Title)
TOWN CON	NECT NETWORK INC	
(Nar	ne of Corporation)	<u> </u>
P22000026432	, a corporation organized under the laws of the State o	
(Document Number, if known)	, , f	
FLORIDA		
<u> </u>	 ·	
		· <u>-</u>
		,
	XX	
	(Signature of resigning officer/director)	
		<u>.</u>

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