P34079

(Re	equestor's Name)	
(Ad	idress)	
(Ad	ddress)	
(Cit	ty/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Bu	usiness Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to	Mission to dopion Mission to dopion Aller of 30/8	

Office Use Only



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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESOLUTION OF THE BOARD OF DIRECTORS TO WITHDRAW THE ALTERNATE NAME FOR USE IN FLORIDA

(Pursuant to section 607.1506 or 617.1506, F.S.)

(Please print or type)

l, the undersigned _ John Bacon	do hereby certify		
(Name)			
that this Resolution of the Board of Directors of <u>Winzer Co</u>	orporation Co		
(Name of Corporatio	n) ====================================		
a corporation duly organized and existing under the laws of was adopted on $\frac{925/8}{}$	Texas (State or Country) Withdrawing the alternate		
name ofWinzer Franchise Company			
(Current Alternate	Name)		
in Florida as its real name is available in Florida.			
Date: 9 75 180 Signature of Chairman, Vice Chairman of the Board a director or any officer	CFO Title of person signing		

FILING FEE \$35

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

Tallahassee, FL 32314

CR2E124 (04/12)

COVER LETTER

Division of Corporations	
	IN # 95-3152321 (Name of Corporation)
DOCUMENT NUMBER: P34079	
The enclosed Resolution of the Board of Diffee are submitted for filing.	rectors to Withdraw the Alternate name for use in Florida and
Please return all correspondence concerning	this matter to the following:
Angie Helm (Name of Contact Person)	
(Name of Contact Person)	
Winzer Corporation (Firm/Company)	
4060 E Plano Pkwy (Address)	
Plano, TX 75074 (City/State and Zip Code) For further information concerning this matter.	ter please call:
For futfler information concerning this man	
Angie Helm (Name of Contact Person)	at (214) 341-2122 (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Flo	orida Department of State for the following amount:
\$35.00 Filing Fee Certificate of Status	\$ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certified of Status & Certified Copy (Additional copy is enclosed)
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
	Tallahassee, FL 32301

CR2E124 (04/12)