

P93000085382

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

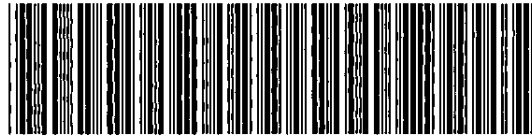
(Business Entity Name)

(Document Number)

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2017/11/17  
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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Tr Wheeler Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** P93000085382

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROGER LEWIS  
(Name of Person)

Tr Wheeler  
(Name of Firm/Company)

1207 Bay Dr  
(Address)

Indian Harbor Bch, FL 32937  
(City/State and Zip Code)

For further information concerning this matter, please call:


Roger Lewis at (321) 848-3229  
(Name of Person) (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

NB This supersedes Any & ALL other  
document.



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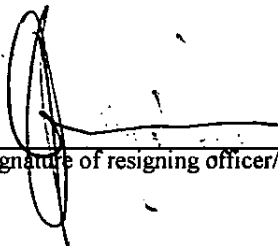
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, ROGER LEWIS, hereby resign as DS / Director Secretary  
(Title)

of Tri Wheeler INC  
(Name of Corporation)

P93000085382, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(Signature of resigning officer/director)

**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

**FILED**  
**08 APR 14 PM 4:28**  
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TALLAHASSEE FLORIDA