P96000056500

(Re	questor's Name)		
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(City/State/Zip/Phone #)			
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14 APR 29 PH 2: 35
SECRETARY OF STATE
TAIL AHASSEF, FLORIDA

TES SE

C. LEWIS

MAY 9 2014

EXAMINER

TRANSMITTAL LETTER

SUBJECT: RW T	YMEWELL, INC.
Sebule II.	(Name of Corporation)
DOCUMENT NUMBER: P96	8000056500
The enclosed Officer/Director Resignation	gnation for a Corporation and fee are submitted for filing
Please return all correspondence co	ncerning this matter to the following:
Ronnie Williams	
(Name of Pers	son)
RW Tymewell, Inc) .
(Name of Firm/Co	ompany)
1201 W. Waters A	\ve.
(Address)	
Tampa Florida 33	604
(City/State and Zi	p Code)
For further information concerning	this matter, please call:
Ronnie Williams	at (813 933-9600 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made	le payable to the Florida Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

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TO:

Amendment Section Division of Corporations

APPROVEL AND FILEC

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

14 APR 29 PM 2: 35
SECRETARY OF STATE
TALL AHASSTE, FLORIDA

_{I,} _Albert Davis	_, hereby resign as_	Director/Officer
/	_,y . •g us_	(Title)
of_RW Tymewell, Inc.		
(Name of Corporati	on)	
P96000056500 , a corpo	ration organized un	der the laws of the State of
FLORIDA		
Allowa		
(Signature of	resigning officer/direct	or)

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