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Harry T. Stenger

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NEW FILINGS	
<input type="checkbox"/>	Profit
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<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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Harry T. Stenger



4917 32nd Street East ◆ Bradenton, Florida 34203
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November 3, 1998

Robert Selph
505 Pameto Rd
Nokomis, FL 34275

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TALLAHASSEE, FLORIDA

RESIGNATION AS OFFICER FOR SOUTHWEST HOLDINGS, INC. AND ASSIGNMENT OF RIGHTS TO STOCK

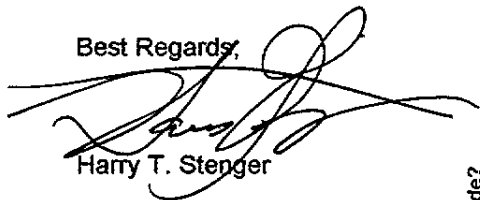
This letter is to inform you that I resign as an officer and member of the board of directors of SouthWest Holdings, Inc..

I also assign, grant and forfeit any rights I had to own shares of stock of SouthWest Holdings, Inc. to Robert Selph.

As of this date I know of no liabilities or debts of SouthWest Holdings, Inc. nor have I signed any obligations or any instruments on behalf of the Corporation that would create any obligation. Any liabilities, obligations or debts are the sole responsibility of the remaining officers & shareholders.

A notice of resignation as Registered Agent will be sent to the Secretary of State of Florida. Also a change of address will be filed with the Social Security Administration supplying the above address as the new place of business for SouthWest Holding, Inc.

Best Regards,



Harry T. Stenger

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

RESTRICTED DELIVERY

2. ☒ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

Robert Selph
505 Pameto Rd
Nokomis FL 34275

4a. Article Number

2095460257

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

11-5-98

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

☒ **RESTRICTED DELIVERY**
Robert Selph

8. Addressee's Address (Only if requested and fee is paid)