

S36795

Lynda Schurman
Requestor's Name

2730 Featherstone Drive
Address

Holiday, FL 34691
City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
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- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<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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97 MAY 19 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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5-21-97

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

May 15, 1997

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida
32314

Attention: Amendment Section

Re: TWINMAC EQUIPMENT OF FLORIDA, INC.
5401 US 19
NEW PORT RICHEY, FLORIDA
34652

FEI # 593062261

Please be advised that effective June 30, 1997, I, Lynda Schurman have resigned from the position of President of Twinmac Equipment of Florida Inc. The Corporation has been notified in writing of my resignation.

Enclosed is a check for \$35.00 to cover the fee for this change.

Would you be kind enough to send verification of this change to me at the following address.

Lynda Schurman
2730 Featherstone Dr.
Holiday, Florida
34691

Thank you for your assistance.

Sincerely,



Lynda Schurman
President
Twinmac Equipment of Florida