(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
•
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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المعاج معيد

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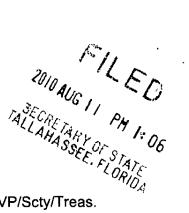
off. Resign.
TB AUG 12 2010

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: Sunshine Laundry, In	nc.
	(Name of Corporation)
DOCUMENT NUMBER: 15989	90
The enclosed Officer/Director Resign	nation for a Corporation and fee are submitted for filing.
Please return all correspondence cond	cerning this matter to the following:
Carla Turner-Hahn, Esquire	
(Name of Perso	n)
•	
(Name of Firm/Con	npany)
PO BOX 41735	
(Address)	<del></del>
St. Petersburg, FL 33743	
(City/State and Zip	Code)
For further information concerning th	his matter, please call:
Carla Turner-Hahn	at ( 727 ) 433-1624 (Area Code & Daytime Telephone Number)
(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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



, Wanda L. Siegle	, hereby resign as	Director/VP/Scty/Treas.
		(Title)
of Sunshine Laundry Inc		
	(Name of Corporation)	,
159890 (Document Number, if known	, a corporation organized ur	der the laws of the State of
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