

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



900315864579

07/20/18--01011--020 \*\*85.00

FILED 2018 JUL 20 AM II: 24 SECRETARY OF STATE

G GOLDEN

JUL 2 5 2018

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Le Poete Ivre, Inc. (Name of Corporation)
DOCUMENT NUMBER: P06000149507
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filin
Please return all correspondence concerning this matter to the following:
Aporni Punyahotra
(Name of Person)
Le Poete Ivre, Inc.
(Name of Firm/Company)
1572 Main Street
(Address)
Sarasota, FL 34236
(City/State and Zip Code)
For further information concerning this matter, please call:
Aporni Punyahotra at (941) 955-8404 (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.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

լ Marc Brediger	, hereby resign as Treasurer
	(Title)
Le Poete Ivre, Inc.	
(Name	of Corporation)
P06000149507 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	_·
	SECRETARY OF STATE AHASSEE. FL

## 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