

P16000055111

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*old Resignation*

AUG 02 2016

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**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LEMAR INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P16000055111

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DOGAN BENGISU  
(Name of Person)

LEMAR INC.  
(Name of Firm/Company)

401 W. Atlantic Ave., Ste. O-11  
(Address)

Delray Beach, FL 33444  
(City/State and Zip Code)

For further information concerning this matter, please call:

DOGAN BENGISU at ( 561 ) 330-2445  
(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:**  
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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TALLAHASSEE, FL 32301

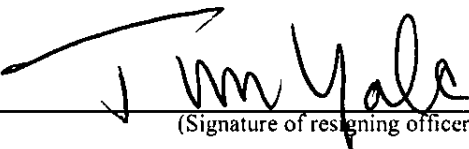
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, TIMUCIN YALCIN, hereby resign as TREASURER  
(Title)

of LEMAR INC.  
(Name of Corporation)

P16000055111, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

**FILED**  
**16 JUL 25 PM 12:25**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**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