

N 17 0000005012

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

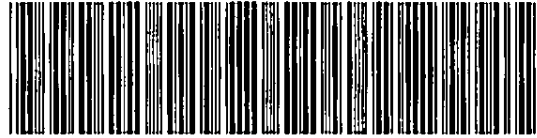
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700349730357

RECEIVED

AUG 05 2020

08/06/20 -- 01002--011 --05.00

FILED
2020 AUG -5 AM 11:42
SECRETARY OF STATE
TALLAHASSEE, FL

JA 09/29/20

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Autism Inspired, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N17000005012

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

Please return all correspondence concerning this matter to the following:

Elizabeth Russell
(Name of Person)

Autism Inspired, Inc
(Name of Firm/Company)

1221 Bermuda Street
(Address)

Clearwater, FL 33755
(City/State and Zip Code)

For further information concerning this matter, please call:

Elizabeth Russell at (702) 540-9569
(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, LOUISE DEL BASSO, hereby resign as DIRECTOR
(Title)

of AUTISM INSPIRED, INC
(Name of Corporation)

N17000005012, a corporation organized under the laws of the State of
(Document Number, if known)

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

SECRETARY OF STATE
TALLAHASSEE, FL

2020 AUG -5 AM 11:42

FILED