## 422528

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cid	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Document Number)		
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NAME OF COMPARATION

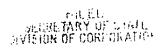
SEP 2 6 2016

**C LEWIS** 

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Wheelblast Inc (Name of Corporation)
DOCUMENT NUMBER: 422528
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Michael Lynch
(Name of Person)
Wheelblast Inc
(Name of Firm/Company)
3951 Copeland Drive
(Address)
Zephyrhills, FL 33542
(City/State and Zip Code)
For further information concerning this matter, please call:
Michael Lynch (Name of Person)  at (813 ) 917-1361 (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: 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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



2016 SEP 22 PM 4: 06

<sub>I,</sub> Susan C. Puryear	, hereby resign as VP and D
	(Title)
<sub>of</sub> Wheelblast Inc	
(Name	e of Corporation)
422528	, a corporation organized under the laws of the State of
(Document Number, if known)	
Florida	

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314