482305

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Consideration to 5 Nov. Office.				
Special Instructions to Filing Officer:				

Office Use Only



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68/27/20--01011--024 ***05.00

2020 MAR 27 PM 2: 52

APR 0 9 2020 S. YOUNG

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Fletcher Music Centers he. (Name of Corporation)
DOCUMENT NUMBER: 482305
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Kimberly Viz Corrondo (Name of Person)
Fletcher Music Centers Inc
3966 Army Circle (Address)
(State and Zip Code)
For further information concerning this matter, please call:
Kimberly Vizamoncho at (727) 454-7112 (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

1. RICK DOEN	hereby re	esign as <u>PLESID</u>	ENT (Title)	
or Fletcher M.	Wile Centers (Name of Corporation)	Inc.		
482305 (Document Number, if known)	. a corporation organ	nized under the laws o	f the State of	
- Florida -	 ·		2020	
			2020 MAR 27 PM	
	(Signature of resigning offi	icer/director)	- 2: 5:	U

FILING FEE IS \$35.00

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

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