

FOS 000 005 335

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

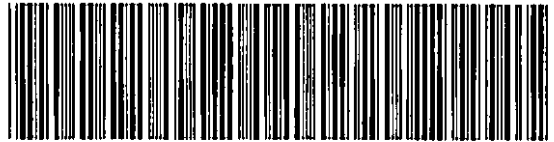
(Business Entity Name)

(Document Number)

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old Resignation

DEC 16 2022

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SUNNY LAND TOURS INC
(Name of Corporation)

DOCUMENT NUMBER: F05000005335

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

Please return all correspondence concerning this matter to the following:

LORI SIDAWI

(Name of Person)

SUNNY LAND TOURS INC

(Name of Firm/Company)

2 TWISTED OAK PL

(Address)

PALM COAST, FL 32137

(City/State and Zip Code)

For further information concerning this matter, please call:

LORI SIDAWI

(Name of Person)

at (386) 597-2112

(Area Code & Daytime Telephone Number)

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SECRETARY OF STATE
TALLAHASSEE, FL
F-11-10

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

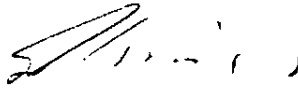
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, ELIE SIDAWI, hereby resign as CCEO/P
(Title)

of SUNNY LAND TOURS INC
(Name of Corporation)

F05000005335, a corporation organized under the laws of the State of
(Document Number, if known)

P/CEO



(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

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