

F17 0000000092

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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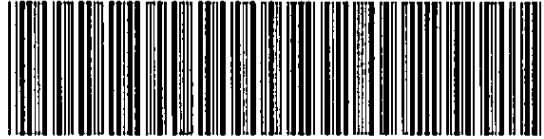
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

JA 10/12/20

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BullBag Corporation

(Name of Corporation)

DOCUMENT NUMBER: ~~BB2054FL~~ F1700000092

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

Please return all correspondence concerning this matter to the following:

Victoria Jacobs

(Name of Person)

BullBag Corporation

(Name of Firm/Company)

3416 Lowson Blvd

(Address)

Delray Beach, FL 33445

(City/State and Zip Code)

For further information concerning this matter, please call:

Victoria Jacobs

_____ at (203) 848-8505
(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

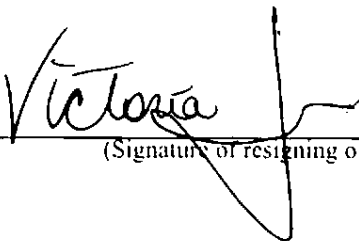
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Victoria Jacobs, hereby resign as Chief Administrative Officer
(Title)

of BullBag Corporation
(Name of Corporation)

~~00000000~~ FL F17000000092, a corporation organized under the laws of the State of
(Document Number, if known)

Delaware


(Signature of resigning officer/director)

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TALLAHASSEE, FL

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