

F24 00000 54163

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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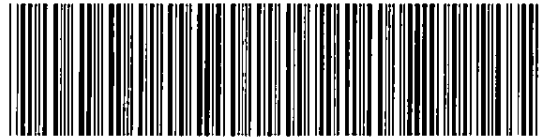
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SATTVA HOSPITALITY FL INC.

(Name of Corporation)

DOCUMENT NUMBER: F24000005963

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

Please return all correspondence concerning this matter to the following:

DIVYANG PATEL

(Name of Person)

SATTVA HOSPITALITY FL INC.

(Name of Firm/Company)

7413 SPRING MOUNTAIN LN

(Address)

YALAHUA, FL. 34797

(City/State and Zip Code)

For further information concerning this matter, please call:

ASHOKKUMAR PATEL
_____ at (905) 906-0626
(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, DIVYANG PATEL, hereby resign as VICE PRESIDENT
(Title)

of SATTVA HOSPITALITY FL INC.
(Name of Corporation)

F24000005963

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



(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

2024 DEC -4 PM 6:07

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