

NALAB 01577

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☒ MAIL

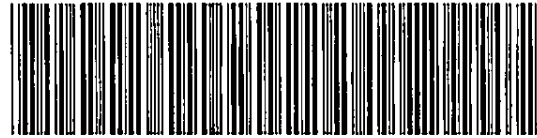
(Business Entity Name)

(Document Number)

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o/D Resign

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DARLYNN'S DARLINS, INC.

(Name of Corporation)

DOCUMENT NUMBER: N01000001579

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

Please return all correspondence concerning this matter to the following:

John B. Chambers

(Name of Person)

(Name of Firm/Company)

P.O. Box 26486

(Address)

Austin, TX 78755

(City/State and Zip Code)

For further information concerning this matter, please call:

John B. Chambers

(Name of Person)

at (512) 345-0909

(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**

I, John B. Chambers, hereby resign as Director
(Title)

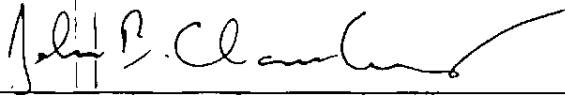
of DARLYNN'S DARLINS, INC.
(Name of Corporation)

N01000001579

(Document Number, if known)

a corporation organized under the laws of the State of

Florida



(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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17 NOV 17 AM 11:40
DEPT. OF STATE
TALLAHASSEE, FLORIDA