NO8 00000 5845

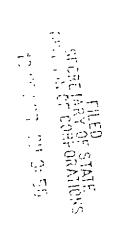
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer

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11/27/19--01012--013 **35.00



OLD Resignation

TRANSMITTAL LETTER

SUBJECT: UNIQUE BOXING TEAM (Name of Corporation)
DOCUMENT NUMBER: ND800005845
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LAURI PODDER (Name of Person)
(Name of Ferson)
(Name of Firm/Company)
(Name of Firm/Company)
37246 DAK LANE (Address)
(Address)
LEMATILLA, FL 32784
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (352) 9787432 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:

Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Amendment Section Division of Corporations

TO:

Mailing Address:

P.O. Box 6327

Amendment Section
Division of Corporations

Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. LAURI PODER, hereby resign as DIRECTOR (Title)	
of UNIQUE BOXING TEAM, INIC. (Name of Corporation)	,
NOSCOCOSSUS . a corporation organized under the laws of the State (Document Number, if known)	of
FLORIDA.	
(Signature of resigning officer/director)	
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Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILING FEE IS \$35.00

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