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(Re	equestor's Name)		
(Ac	ddress)	_	
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76.			
(Ad	ddress)		
(Cit	ty/State/Zip/Phone #)		
PICK-UP	WAIT MA	AIL	
<u> </u>	ninga (Catho blanca)		
(Bu	usiness Entity Name)		
(Document Number)			
Certified Copies	_ Certificates of Status		
	_		
Special Instructions to Filing Officer:			
	J. HC 77.5	<u>:</u>	
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Office Use Only



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09/18/23--01020--004 **35.00



OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

i. Jemifar Jicha		OFFICER 14
i, Verrilla Vicina	, hereby resign as	(Title)
	· · · · · · · · · · · · · · · · · · ·	
of Falcons	Baseball Boost	CIS
	Name of Corporation)	
(Document Number, if known)	, a corporation organized unc	ler the laws of the State of
Florida		
	·	
	fernfu fix	ih_
	(Signature of resigning officer/direct	or)

FILING FEE IS \$35.00

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

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314