DUNIJZ (Requestor's Name) (Address) 700280060577 (Address) (City/State/Zip/Phone #) 01/07/16--01010--006 \*\*35.00 PICK-UP 🗌 WAIT MAIL (Business Entity Name) (Document Number) 2016 JAN - 7 Certificates of Status Certified Copies \_\_\_\_\_ - Fi Special Instructions to Filing Officer: PM 1: 45  $\Box$ Office Use Only

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#### TRANSMITTAL LETTER

**TO:** Amendment Section Division of Corporations

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### SUBJECT: That Place Inc

(Name of Corporation)

# DOCUMENT NUMBER: N0013000007620

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

Please return all correspondence concerning this matter to the following:

## Charmaine Borda

(Name of Person)

That Place Inc

(Name of Firm/Company)

PO BOX 17123

(Address)

## Plantation, FL 33318

(City/State and Zip Code)

For further information concerning this matter, please call:

#### **Charmaine Borda**

(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 2661 Executive Center Circle Tallahassee, FL 32301

CR2E044 (05/13)

#### OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

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- - - -

I, Sarah Walker	, hereby resign as Vice President
of That Place Inc	(Title)
(Name o N13000007620 (Document Number, if known) Florida	, a corporation organized under the laws of the State of
	ghature of resigning officer/director)
FI	LING 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