

N160000005723

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

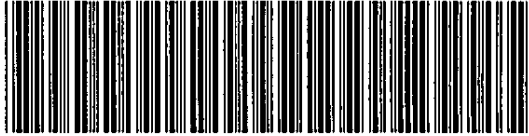
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Transpire Help, Inc
(Name of Corporation)

DOCUMENT NUMBER: N16000005723

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

Please return all correspondence concerning this matter to the following:

Donna Weinberger
(Name of Person)

Transpire Help, Inc.
(Name of Firm/Company)

1414 N D St
(Address)

Lake Worth, FL 33460
(City/State and Zip Code)

For further information concerning this matter, please call:

Donna Weinberger at (561) 899-6088
(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

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TALLAHASSEE, FL

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

Donna Mark, Secretary, hereby resigns as Secretary (Title)

of Transpire Help, Inc. (Name of Corporation)

N16000005723 a corporation organized under the laws of the State of Florida (Document Number, if known)

Donna Mark 10/05/2016 (Signature of resigning officer/director)

FILING FEE IS \$35.00

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

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

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TALLAHASSEE, FLORIDA