

N24000002032

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





700437475607

10/08/24--01024--019 **87.50



TRANSMITTAL LETTER

SUBJECT: SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER: N24000002032	
The enclosed Officer/Director Resignation for	or a Corporation and fee are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Stephanic Bankhardt	
(Name of Person)	
Ohana's Consulting & Marketing Solutions	
(Name of Firm/Company)	
1 Poince Pl.	
(Address)	
Palm Coast, FL 32164	
(City/State and Zip Code)	
For further information concerning this matt	er, please call:
Stephanic Bankhardt	at (916-9570 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35,00 made payable	e to the Florida Department of State.
Mailing Address: Amendment Section	Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO: Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Savanna Morris I	President , hereby resign as
*	(Title)
SKC Hands Up Rescue Flagi	er, Inc.
	(Name of Corporation)
N24000002032	a corporation organized under the laws of the State of
(Document Number, if kr	ioni)
Florida	
	 ·
	Savann-Morris
	(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