

P02 0000 27959

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

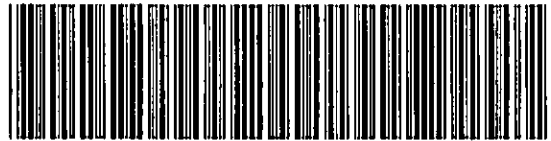
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SECRETARY OF STATE
TALLAHASSEE, FL

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DANIEL'S COMPANY

(Name of Corporation)

DOCUMENT NUMBER: P02000027959

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

Please return all correspondence concerning this matter to the following:

LASCELLES DANIELS

(Name of Person)

DANIEL'S COMPANY

(Name of Firm/Company)

PO BOX 683404

(Address)

ORLANDO, FL 32868

(City/State and Zip Code)

For further information concerning this matter, please call:

LASCELLES DANIELS at (407) 299-1077

(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED

2022 MAR -7 PM 12:18

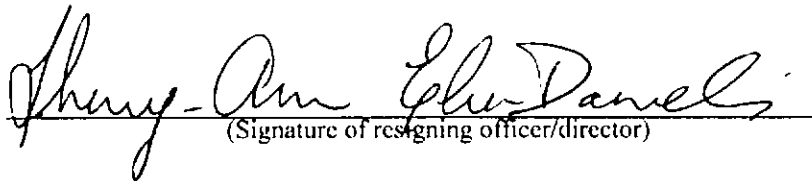
SECRETARY OF STATE
TALLAHASSEE, FL.

I, SHERRY-ANN ELIE-DANIELS, hereby resign as SECRETARY
(Title)

of DANIEL'S COMPANY
(Name of Corporation)

P02000027959, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(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