

PD2D000076776

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

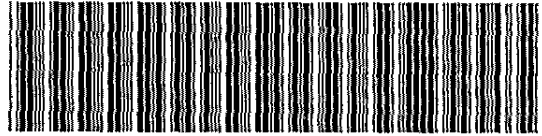
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 FEB 14 AM 9:56

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DYL INC
(Name of Corporation)

DOCUMENT NUMBER: P02000076776

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

Please return all correspondence concerning this matter to the following:

ADETOUN A AFOLABI

(Name of Person)

DYL INC

(Name of Firm/Company)

27652 BREAKERS DRIVE

(Address)

WESLEY CHAPEL FL 33543

(City/State and Zip Code)

For further information concerning this matter, please call:

ADETOUN A AFOLABI

(Name of Person)

at (813) 631-9597

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

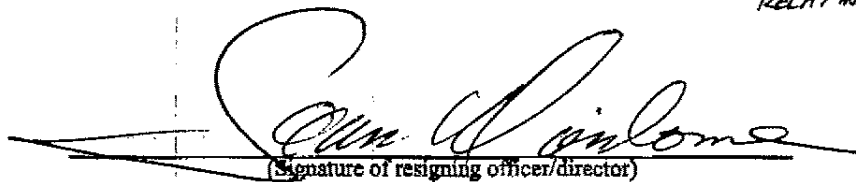
I, JEAN DIEUDONNE, hereby resign as DIRECTOR
(Title)

of DYL, INC.
(Name of Corporation)

P02000076776, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

** WITH SPECIAL CONDITION.
RELATING TO DYL PHARMACY
ONLY! **


(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

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DIVISION OF CORPORATIONS
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