PD3000081058

(Da	Augustada Nama	
(R€	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
	. Ni	
(De	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TALLAHASSEE FLORINA



TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Akhy Enter tain ment Inc (Name of Corporation) DOCUMENT NUMBER: 103000081058
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filin
Please return all correspondence concerning this matter to the following:
Jose Carly Bordes (Name of Person)
AKhy Entertainment Inc (Name of Firm/Company)
540 NW 165 STrut Rd. Suite 305-A (Address)
North Mianzi FL 33/69 (City/State and Zip Code)
For further information concerning this matter, please call:
TOSE BORDES at (305) 944-0166 (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 409 E. Gaines Street Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION - FOR A CORPORATION

I, Gakunga Kihohia , hereby resign as_	Vice President
Ŭ	(Title)
of Akhy Entertainment Inc	7
(Name of Corporation)	
PO 30000 81053 a corporation organized und	ler the laws of the State of
Florida	
Lunge	2
(Signature of resigning officer/direct	or)

FILING FEE IS \$35.00