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(Re	equestor's Name)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		





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OCT 2.4 2019 LALBELT FOR

TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Siberian Construction Inc (Name of Corporation) DOCUMENT NUMBER: P0500007298
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mark Thi hadeau (Name of Person)
Siberian Construction Ine (Name of Firm/Company)
910 E(1 Www. (Address))
Savasota, H. 34243 (City/State and Zip Code)
For further information concerning this matter, please call:
Mark Mi bodeau at (941) 536-8414 (Name of Person) at (941) 636-8414 (Area Code & Daytime Telephone Number)

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

TO:

Amendment Section

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 9, 2019

MARK THIBODEAU 910 ELL WAY SARASOTA, FL 34243

SUBJECT: SIBERIAN CONSTRUCTION INC

Ref. Number: P05000007298

We have received your document for SIBERIAN CONSTRUCTION INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 619A00020762

www.sunbiz.org

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Rhondalanham hereby resign as	(Title)
of Sherian Construction (Name of Corporation)	. ,
(Document Number, if known) (Document Number, if known)	laws of the State of

(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