

PO6000128603

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

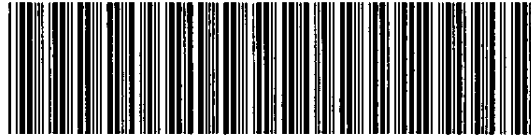
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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08/19/15--01021--002 \*\*35.00

*Resignation  
of officer*

FILED  
2015 AUG 19 PM 2:50  
STATE OF FLORIDA  
TALLAHASSEE

AUG 20 2015  
A RAMSEY

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Amynsony Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P06000128603

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

Please return all correspondence concerning this matter to the following:

**Shama Panjwani**

(Name of Person)

(Name of Firm/Company)

**1215 W Palmetto Park road**

(Address)

**Boca Raton FL 33486**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Shama Panjwani**

(Name of Person)

at ( **954** ) **439 4090**

(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  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Shama Panjwani, hereby resign as President  
(Title)

of Amysony Inc. (i have no idea how my name got in this corporation, please remove from day one)  
(Name of Corporation)

P06000128603

(Document Number, if known)

Florida

a corporation organized under the laws of the State

FILED  
2015 AUG 19 PM 2:50  
TALLAHASSEE, FLORIDA  
DEPT OF STATE

Shama Panjwani  
(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