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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	? #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		:
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Office Use Only



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COVER LETTER

Division of Corporations
SUBJECT: Find's Party Supplies (Name of Corporation)
DOCUMENT NUMBER:
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Cuigi Vergani (Name of Person)
(Name of Firm/Company)
250 I Pulm Dr. 460 (Address)
Florida City, FL 33024 (City/State and Zip Code)
For further information concerning this matter, please call:
Meta Mumby Vemani at (30 c) 298-1802 (Namo of Person) at (30 c) Day time Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

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

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TO: Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	Cuiai Vergani, hereby resign as Vice President
of	Find's Party Supplies, Inc.
	(Document Number, if known) a corporation organized under the laws of the State of
<u>,</u>	
	(Signature of resigning officer/director)
	O7 FEE SECRET TALLAHA
	FILING FEE IS \$35.00 FILING FEE IS \$35.00 Make checks payable to Florida Department of State and mail to A
	Make checks payable to Florida Department of State and mail to

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314