P070000 14515

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Business Ellity Halle)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	





200357910012

01/14/21--01011--015 **35.00

2021 JAN 14 PM 3: 04 SECRETARY OF STATE

2/2721

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
New Shun Fa, Inc. SUBJECT:	
JOBOLET	(Name of Corporation)
DOCUMENT NUMBER: P07000014515	
The enclosed Officer/Director Resignation	for a Corporation and fee are submitted for filing
Please return all correspondence concernit	ng this matter to the following:
Shu Qin Zhang	
. (Name of Person)	
(Name of Firm/Company)
16611 Toccoa Row	
(Address)	
Winter Garden, Florida 34787	
(City/State and Zip Code)	
For further information concerning this ma	atter, please call:
Brian Kwong	at (407) 350-9588 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payal	ble to the Florida Department of State.
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
rananassee, i E 52517	Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. Lu Li	Vice President and Director hereby resign as	
· · · · · · · · · · · · · · · · · · ·	, hereby resign as (Title)	-
New Shun Fa, Inc.		
(Name of	Corporation)	
P07000014515 (Document Number, if known)	a corporation organized under the laws of the State of	
Florida		
——————————————————————————————————————	nature of resigning officer/director)	T

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