## PO166615859

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
1
(Business Entity Name)
1
(Document Number)
Certified Copies Certificates of Status
<del> </del>
Special Instructions to Filing Officer:
1
į

Office Use Only



800306304228

12/41/17--01009--025 \*\*35.00

FILED

SECTION PHINE

CD||25

DEC 12 2017 I ALBRITTON

## TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: The Furniture Box, Inc.
(Name of Corporation)  DOCUMENT NUMBER: P07000115859
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Laura A. Rachlin
(Name of Person)
The Furniture Box, Inc.
(Name of Firm/Company)
2080 NW Boca Raton Blvd.
(Address)
Boca Raton, FL 33431
(City/State and Zip Code)
For further information concerning this matter, please call:
Laura Rachlin at (561 )620-2814 (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
ENCLOSED
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

լ Mary Z. McGovern	hereby resign as PResident
	(Title)
<sub>of</sub> The Furniture Box, I	nc.
(Name o	of Corporation)
P07000115859	_, a corporation organized under the laws of the State of
(Document Number, if known)	is a corporation organized under the airro of the State of
Florida	
	±'
Ma	in Mc B
/ (Si	gnapaire of resigning officer/director)
	<b>986 二 下</b>
!	LING FEE IS \$35.00
rı	EING FEE 13 333.00

Make checks payable to Florida Department of State and mail to:

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