

PD9000050295

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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(Business Entity Name)

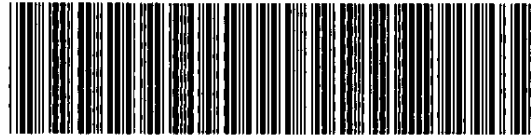
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10 JUN 17 PM 12:15  
DEPARTMENT OF STATE  
HALLANDSBEE, FLORIDA

Roberts JUN 18 2010

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Superhuman Experiment, Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** P09000050295

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

Please return all correspondence concerning this matter to the following:

Michael Sciacchitano D.C.  
(Name of Person)

Superhuman Experiment, Inc  
(Name of Firm/Company)

P.O. Box 5395  
(Address)

Plant City, FL 33563  
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Sciacchitano at (813) 506-9774  
(Name of Person) (Area Code & Daytime Telephone Number)

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

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


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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Amanda Sprague, hereby resign as officer/director  
(Title)

of Superhuman Experiment, Inc  
(Name of Corporation)

- P09000050295 - a corporation organized under the laws of the State of  
(Document Number, if known)

  
(Signature of resigning officer/director)

FILED  
10 JUN 17 PM 12:15  
TALLAHASSEE, FLORIDA  
DEPT. OF STATE

**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