

PO9 000089830

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

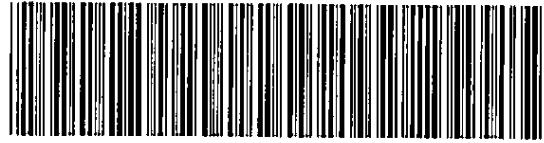
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S. YOUNG

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FLOPPY, INC.

(Name of Corporation)

DOCUMENT NUMBER: P09000089830

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

Please return all correspondence concerning this matter to the following:

DONER GARCIA

(Name of Person)

(Name of Firm/Company)

9240 SW 72ND STREET, SUITE 205

(Address)

MIAMI, FL 33173

(City/State and Zip Code)

For further information concerning this matter, please call:

DONER GARCIA 305 699-7081
_____ at (_____) _____
(Name of Person) (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

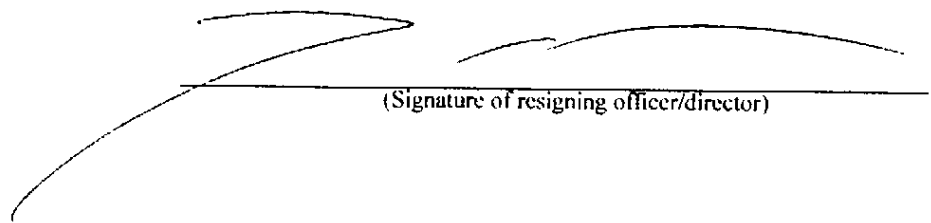
Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, DONER GARCIA, hereby resign as Pres., V.P., Treas. and Sec.
(Title)

of FLOPPY, INC.
(Name of Corporation)

P09000089830
(Document Number, if known), a corporation organized under the laws of the State of
FLORIDA


(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

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