D:1000013016

(Red	questor's Name)	
(Ado	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Dod	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to F	Filing Officer:	
		; ;





900269882219

02/24/15--01020--007 **35.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

Division of Corporations
SUBJECT: 4 EAGLS Inc. (Name of Corporation)
DOCUMENT NUMBER: (10000012016
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Lean Lasprilla (Name of Person)
C/O Trilling (Name of Firm/Company)
21690 MAYIGOT Drive
Boca Parin FU 33428 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (SCI) 385-3562 (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

Amendment Section

TO:

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	Lean lasprilla, hereby resign as ViP.
of_	4 EAGles Inc
	(Name of Corporation) (Name of Corporation) (Document Number, if known) (Name of Corporation) (Name of Corporation)
	Morida
	Jean Jegalle
	(Signature of resigning officer/director)

FILING FEE IS \$35.00

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

15 FEB 24 PM 3: 16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AND FILED

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