

P100000019564

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

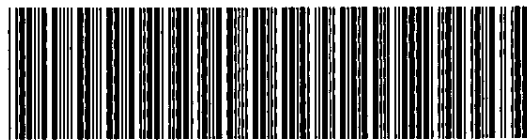
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** FlipnPics Flip Books, Inc  
Name of Corporation

**DOCUMENT NUMBER:** P10000019564

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Barry Dreyer  
Name of Contact Person

FlipnPics Flip Books, Inc  
Firm/Company

3820 NW 79 Way  
Address

Davie, Florida 33024  
City/State and Zip Code

FlipnPics@Yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Barry Dreyer at ( 954 ) 663-0464  
Name of Contact Person Area Code & Daytime Telephone Number

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

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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

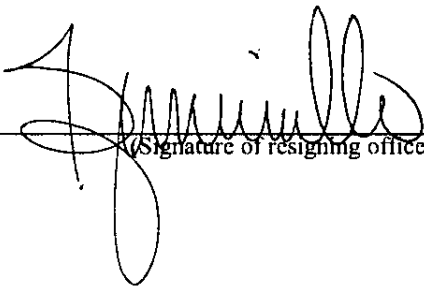
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Gail Jaramillo, hereby resign as President  
(Title)

of FlipnPics Flip Books, Inc  
(Name of Corporation)

P0000019564, a corporation organized under the laws of the State of  
(Document Number, if known)

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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