

P110000096611

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

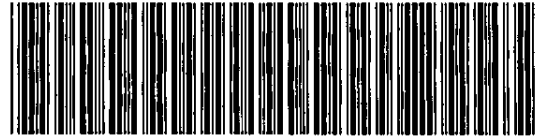
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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800258826088

*Resignation  
to Officer*

04/14/14--01031--017 \*\*35.00

FILED  
2014 APR 14 PM 4:53  
TALLAHASSEE, FLORIDA

*DR  
4/22/14*

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** FAB BRANDZ INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P11000096611

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

Please return all correspondence concerning this matter to the following:

**KAREENA SUJANANI**

(Name of Person)

**FAB BRANDZ INC.**

(Name of Firm/Company)

**P.O.BOX 661**

(Address)

**RICHMOND, VA 23219**

(City/State and Zip Code)

For further information concerning this matter, please call:

**KAREENA SUJANANI** at ( 917 ) 8557496  
(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**

FILED

28 APR 14 PM 4:53

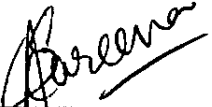
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

I, KAREENA SUJANANI, hereby resign as PRESIDENT & SECRETARY  
(Title)

of FAB BRANDZ INC.  
(Name of Corporation)

P11000096611, 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