

P120000001000

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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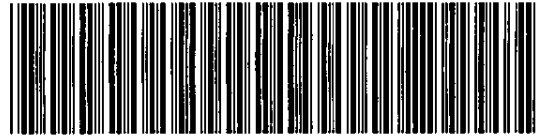
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 FEB 20 AM 8:30

OD/RES  
@ 2/21/12

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SAMMIEREE INC

(Name of Corporation)

**DOCUMENT NUMBER:** P12000001066

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

Please return all correspondence concerning this matter to the following:

THERESA BEZZINA

(Name of Person)

SAMMIEREE INC

(Name of Firm/Company)

5109 SW 90TH AVE

(Address)

COOPER CITY, FL 33328

(City/State and Zip Code)

For further information concerning this matter, please call:

THERESA BEZZINA

(Name of Person)

at ( 954 ) 858-6195

(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, SAMANTHA BEZZINA, hereby resign as VICE PRESIDENT  
(Title)

of SAMMIEREE INC  
(Name of Corporation)

P12000001066, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

*Samantha Bezzina*  
(Signature of resigning officer/director)

12 FEB 20 AM 8:30  
FLA. DEPT. OF STATE  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS

**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