## P12600053635

(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	<b></b> WAIT	MAIL			
(Bu	siness Entity Nar	ne)			
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					





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## TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Fruit Fun. Inc. (Name of Corporation)
DOCUMENT NUMBER: 712000053635
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Marsha L. Dyal (Name of Person)
Fruit Fun, Inc. (Name of Firm/Company)
3807 Parapet Dr. (Address)
Cocoa, FL 32926 (City/State and Zip Code)
For further information concerning this matter, please call:
Marsha L. Dyal at (321) 482-9558 (Name of Person) (Area Code & Daytime Telephone Number)

TO:

**Amendment Section** 

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

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

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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Rache	I P. Dyo	1	_, hereby resign	as <u>Secre</u> -	tary / Tr	eas	urei
of Fruit	Fun, Inc	ne of Corporat	ion)				_,
P1200005 (Document No	3635 umber, if known)	, а согро	ration organized	under the laws	of the State	of	
Florida	<u> </u>	<u></u> .					
						,	
	Rulf.	Pal (Signature of	resigning officer/d	irector)	ALL AHAS	2016 BEC 22	71
		(orginimo or	Toolganing officer/d		ASSEL FL		ILED.
					ن شر	<b>سیر</b> ر	

## 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