

P12 000054 695

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(Address)

(Address)

(City/State/Zip/Phone #)

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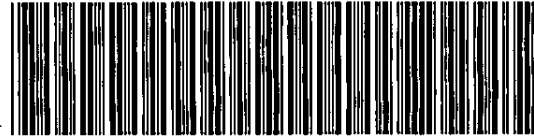
(Business Entity Name)

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11/15/16

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Traci Lynn, Inc
(Name of Corporation)

DOCUMENT NUMBER: P12000054695

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

Please return all correspondence concerning this matter to the following:

Dr. Tracy Lynn Burton
(Name of Person)

Traci Lynn Inc
(Name of Firm/Company)

888 SE 3rd Avenue, Suite 301
(Address)

Fort Lauderdale, FL 33316
(City/State and Zip Code)

For further information concerning this matter, please call:

Dr. Tracy Lynn Burton at (954) 566-0553
(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**

I, Linda Ware, hereby resign as Secretary / Treasurer
(Title)

of Traci Lynn Inc.
(Name of Corporation)

P12000054695, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Linda Ware
(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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