

P/2000061423

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

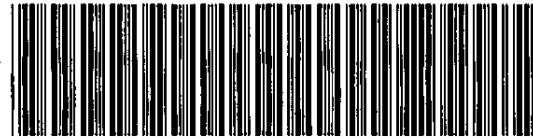
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA  
14 FEB -4 PM 4:03

*off/DisResign*

FEB 10 2014

T. CARTER

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** JHHANE INC.

(Name of Corporation)

**DOCUMENT NUMBER:** P12000061423

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

Please return all correspondence concerning this matter to the following:

**ALINE YAP**

(Name of Person)

(Name of Firm/Company)

**1025 W. OAK RIDGE RD.**

(Address)

**ORLANDO, FL 32809**

(City/State and Zip Code)

For further information concerning this matter, please call:

**ALINE YAP**

(Name of Person)

at ( **407** ) **493-2402**

(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  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

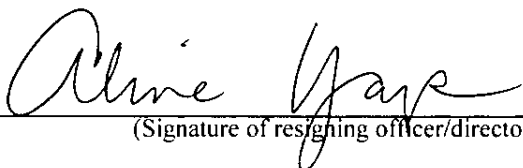
14 FEB -4 PM 4:03

I, ALINE YAP, hereby resign as DIRECTOR  
(Title)

of JHHANE INC.  
(Name of Corporation)

P12000061423, 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