

P130000 68155

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

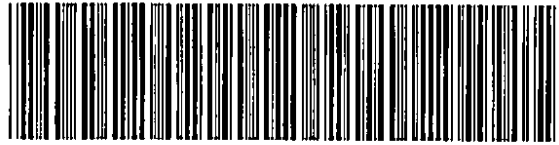
(Business Entity Name)

(Document Number)

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MAR 15 2019
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bruce's of Great Neck, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P13000068155

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

Please return all correspondence concerning this matter to the following:

Bruze Zipes

(Name of Person)

Bruce's of Great Neck, Inc.

(Name of Firm/Company)

19575 S. State Road 7, Units 7-8A

(Address)

Boca Raton, FL 33498

(City/State and Zip Code)

For further information concerning this matter, please call:

Bruce Zipes

(Name of Person)

at (516) 423-3678

(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

2019 MAR -5 AM 8:11
TALLAHASSEE
FLORIDA
DEPARTMENT OF STATE

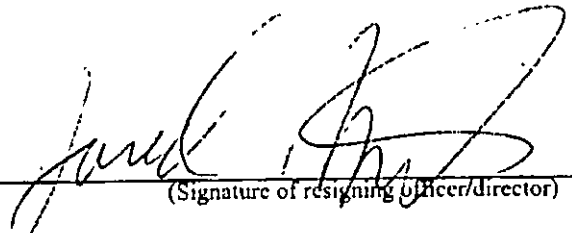
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

2008 MAR 5 AM 8:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Jared Zipes, hereby resign as "V"
(Title)

of Bruce's of Great Neck, Inc.
(Name of Corporation)

P13000068155, 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