P14000008792

(Requestor's Name)	
(Address)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	
:	_
Special Instructions to Filing Officer: 1 2	3

Office Use Only



000417508520

10/19/23--01003--010 **35.00



TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: BAJA BU	CA CORP (Name of Corporation)
DOCUMENT NUMBER: <u>P</u>	4000008792
The enclosed Officer/Director Resig	gnation for a Corporation and fee are submitted for filing.
Please return all correspondence co	neerning this matter to the following:
Malik Zegal (Name of Pers	son)
(Name of Firm/Co	ompany)
2127 33RD ST	rect Apt 3G
ASTORIA NY 1 (City/State and Zi	1105 p Code)
For further information concerning	this matter, please call:
Mark Zegal (Name of Person)	at (917) 747-0600 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 mad	le payable to the Florida Department of State.
Mailing Address: Amendment Section	Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO:

(Signature of resigning officer/director)

OFFICER / DIRECTOR RESIGNATI

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