P14000049324

(Requestor's Name)				
(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:				

Office Use Only



700438745477

10/31/24--01017--015 **35.00

SECRETARY OF STATE

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

(Name of Person)	(Area C	Ode & Daytime Teleph	one Number)
SULING WU	786 at (586-0161)	
For further information concerning this mat	ter, please ca	11:	PH 2: 40
(City/State and Zip Code)	_ _		SSE PA
WESTON, FL 33327			77ARY
(Address)	_	 -	SE OCI
2196 SALERNO CIR			2024 OCT 31 SECRETAR TAILLAH
(Name of Firm/Company)	•		
BROTHERS FARMS INC			
(Name of Person)	1.1.	<u> </u>	
SULING WU			
Please return all correspondence concerning	g this matter t	o the following:	
The enclosed Officer/Director Resignation	for a Corpora	tion and fee are subm	itted for filing.
DOCUMENT NUMBER: P14000049324	_		
	(Name of Cor	poration)	
BROTHERS FARMS INC SUBJECT:			

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

SUHONG WU L	, hereby resign as			
		(Title)		
BROTHERS FARMS INC				
(Nam	ne of Corporation)	, ·		
P14000049324	, a corporation organized under the laws of	f the State of		
(Document Number, if known)				
FLORIDA				
	(Signature of resigning officer/director)	SECRETARY OF STA		

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