

P14 000 92321

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

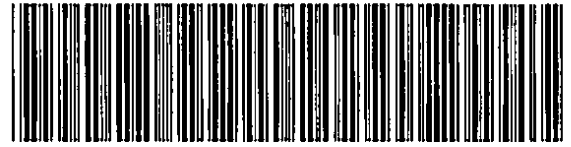
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C. BRUMBLEY
JAN 11 2022

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: INDAME CORP.

(Name of Corporation)

DOCUMENT NUMBER: P-14000092321

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

Please return all correspondence concerning this matter to the following:

GINA INDACOCHEA

(Name of Person)

INDAME CORP

(Name of Firm/Company)

10442 SUNRISE LAKES BLVD. UNIT 110

(Address)

SUNRISE, FL 33392

(City/State and Zip Code)

For further information concerning this matter, please call:

GINA INDACOCHEA

(Name of Person)

at (954) 632 62 89

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

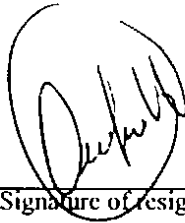
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, ORLANDO LUNA VICTORIA, hereby resign as OFFICER
(Title)

of INDAME CORP
(Name of Corporation)

P-14 0000 92321, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA



(Signature of resigning officer/director)

2021 DEC 20 AM 11:33

FILED

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