P150000 92937

(Requestor's Name)
(Address)
(Address)
(City (Chala 77 in ID) and 40
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entry Hame)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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TRANSMITTAL LETTER

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ΓΟ: Amendment Section Division of Corporations			50 x 1 5 0 5 3 . 0 6
The Fabri-clean, Inc.			~ <i>i</i>
	ame of Cor	rporation)	
DOCUMENT NUMBER: P15000092937		***	 .
The enclosed Officer/Director Resignation for	a Corpora	ation and fee are submitted for fil	ing.
Please return all correspondence concerning th	is matter t	to the following:	
1		<u>C</u>	
			
Elizabeth Sherwood (Name of Person)	– –		
(Name of Person) (Name of Firm/Company)			
(Name of Person) (Name of Firm/Company) 5635 Devonbriar Way, K101			
(Name of Person) (Name of Firm/Company) 5635 Devonbriar Way, K101 (Address)			
(Name of Person) (Name of Firm/Company) 5635 Devonbriar Way, K101 (Address) Orland, Florida, 32822			
(Name of Person) (Name of Firm/Company) 5635 Devonbriar Way, K101 (Address)			
(Name of Person) (Name of Firm/Company) 5635 Devonbriar Way, K101 (Address) Orland, Florida, 32822 (City/State and Zip Code)	, please ca	all:	
(Name of Firm/Company) 5635 Devonbriar Way, K101 (Address) Orland, Florida, 32822 (City/State and Zip Code) For further information concerning this matter		all: 618 6434 Code & Daytime Telephone Numbe	

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

	/ DIRECTOR RESIGNATION OR A CORPORATION President / Treasurer hereby resign as
Elizabeth Sherwood	بن. President / Treasurer راجي , hereby resign as
The Fabri-clean, Inc. of(Nan	ne of Corporation)
P15 000092937	, a corporation organized under the laws of the State of
Florida	
•	Li 3a Lerk Shen work (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