

P15000081086

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE FLORIDA

W.D.R.

FEB 08 2016

R. White

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: **RESIGNATION SNS EXPRESSIONS, INC**  
(Name of Corporation)

DOCUMENT NUMBER: **P15000094086**

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

Please return all correspondence concerning this matter to the following:

**SHANDRIA STRIGGLES**

(Name of Person)

**SNS EXPRESSIONS, INC**

(Name of Firm/Company)

**4046 NW 19TH ST, UNIT 206**

(Address)

**LAUDERHILL, FL 33313**

(City/State and Zip Code)

For further information concerning this matter, please call:

Shandria Striggles at ( 954 ) 401-7260  
(Name of Person) (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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Shandria Striggles, hereby resign as CEO  
(Title)

of SNS EXPRESSIONS, INC  
(Name of Corporation)

P15000094086, 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

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**TALLAHASSEE FLORIDA**