## P150000097731

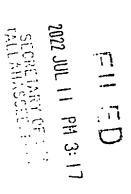
(Requestor's Name)
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## TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations			
SUB.	JECT:	(Name of Co	poration)	
DOC	UMENT NUMBER: P15000097731	(*		
The c	enclosed Officer/Director Resignation	on for a Corpora	tion and fee are submitted for filing	
Pleas	e return all correspondence concern	ning this matter t	to the following:	
PANK	KAJ PATEL			
	(Name of Person)		<del></del>	
	(Name of Firm/Compan	iy)	<del></del>	
3501-	K N PONCE DE LEON BLVD			
	(Address)	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
ST A	UGUSTINE, FL 32084			
	(City/State and Zip Cod	(e)		
For f	urther information concerning this r	natter, please ca	11:	
PANK	KAJ PATEL	904	501-3506 ) Code & Daytime Telephone Number)	
<del></del>	(Name of Person)	(Area (	Code & Daytime Telephone Number)	
Enclo	osed is a check for \$35.00 made pay	able to the Flor	ida Department of State.	
	Mailing Address:	****	et Address: endment Section	
Amendment Section Division of Corporations			Division of Corporations	
	P.O. Box 6327		Centre of Tallahassee	
	Tallahassee, FL 32314	241	5 N. Monroe Street, Suite 810 ahassee, FL 32303	

2022 JUL 11 PM 3: 18

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

DARSHAN PATEL	OFFICER , hereby resign as
·,	(Title)
OHM NAMH SHIVAY INC	
(	Name of Corporation)
P15000097731 (Document Number, if known)	, a corporation organized under the laws of the State of
FLORIDA	·
1) 684	(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