P1600005837a

(1	Requestor's Name)	
	Address)	
	Address)	
(/	Address)	
((City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	Business Entity Name)	
(1	business Entity Name)	
(1	Document Number)	
Certified Copies	Certificates of	Status
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Special Instructions	to Filing Officer	
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R. WHITE

TRANSMITTAL LETTER

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SUBJECT: 10 SECONDSEXY CORPORATION (Name of Corporation)			
DOCUMENT NUMBER: P16000058372			
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
RICE, SCOTT W, MD (Name of Person)			
(Name of Firm/Company)			
4446 HENDRICKS AVE, STE 217 (Address)			
JACKSONVILLE, FL 32207 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Scott W. Rice. at (352) 514-8830 (Name of Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for \$35.00 made payable to the Florida Department of State.			

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

Amendment Section Division of Corporations

TO:

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

President, Treesures
I. Scott W. Rice MD, hereby resign as Director (PTSD)
of 10 SECOND SEXY CORPORATION (Name of Corporation)
P16000 5837 2 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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Treesures
tor (PTSD)
the State of
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Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314