## P170000 a7355

(Requestor's Name)	
(Address)	
(Address)	<u> </u>
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Statu	s
Special Instructions to Filing Officer:	
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IN APR -S P 3 58
SECRETARY OF STATE
ALLAHASSEEFFLORION

APR 0 6 2017

T. LEMIEUX



## TRANSMITTAL LETTER

SUBJECT: Epic Enterprise inc (Name of Corporation)
DOCUMENT NUMBER: P17000027355
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
(Name of Person)
Epic Enterpsise inc (Name of Firm/Company)
5325 EmerSon St (Address)
JackSonvill FL 32207 (City/State and Zip Code)
For further information concerning this matter, please call:
Overon Frulkuck at (246) 351 - 3971 (Name of Person) (Area Code & Daytime Telephone Number)
(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

I. Quecan K FAUl Knes, hereby resign as President
(Title)
of EPIC ENTERPRISE (Name of Corporation)
017000027277
(Document Number, if known), a corporation organized under the laws of the State of
Florida

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and m

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314