P170000 34279

(Re	equestor's Name)	
(Ad	ddress)	
(Ad	ddress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Bu	usiness Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	

Office Use Only



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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	The state of the s
SUBJECT:	Sto Mondo
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing	' **
Please return all correspondence concerning this matter to the following:	
Rachel 14:98S (Name of Person)	
JP LYNN CRYCTAL OUTLET INC (Name of Firm/Company)	
77/6 Caprio Dr (Address)	
Boynton Reach FC 33472 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Radal A 1855 at (954) 980 0280 (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

	١.
I. Rabel Histo hereby resign as 066: 4 (Title)	<u>(2</u>
of JR LYNN CRYSTAL ON LET INC. (Name of Corporation)	
P17600034279 , 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