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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : FLL BUSINESS SOLUTION CORP

Account Number : 120190000092 : (754)202-8663 Fax Number : (786)636-3620

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: FLLbusiness@outlook.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN FLL BUSINESS SOLUTION CORP

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J. HORNE

JAN 2 0 2023

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TRANSMITTAL LETTER

TO:	Amendment Section
	Division of Corporations
SUBJ	FLL BUSINESS SOLUTION CORP
	(Name of Corporation)
DOC	JMENT NUMBER: P17000093816
The e	closed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please	return all correspondence concerning this matter to the following:
XIAN	IY CHINCHILLA
	(Name of Person)
FLL B	JSINESS SOLUTION CORP
	(Name of Firm/Company)
8350 V	' STATE ROAD 84
	(Address)
DAVI	FLORIDA 33324
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
XIAN	(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.

Mailing Address:

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

Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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OSCAR LOPEZ	PRESIDENT, hereby resign as
	(Title)
FLL HUSINESS SOLUTION CORP	
(Nai	ne of Corporation)
P17060093816 (Document Number, if known)	, a corporation organized under the laws of the State of
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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