P18000005619

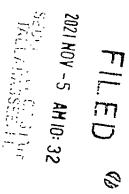
(Requestor's Name)
(Address)
(//dd/033)
(Address)
(City/State/Zip/Phone #)
(Styretaterzija) Holle ny
PICK-UP WAIT MAIL
(Business Entity Name)
(Busiless Chity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900375813959

11/05/21--01013--021 **35.00



C. BRUMBLEY NOV 2 3 2021

TRANSMITTAL LETTER

Division of Corporations The Chris Thomas Band Inc. SUBJECT: (Name of Corporation) P18000005619 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Sarah Lee (Name of Person) The Chris Thomas Band Inc. (Name of Firm/Company) 11999 Wynnfield Lakes Circle (Address) Jacksonville, FL. 32246 (City/State and Zip Code) For further information concerning this matter, please call: Sarah Lee 904 234-6554 (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Christopher Thomas	President		
I	, hereby resign as	(Title)	_
The Chris Thomas Band Inc.			
of	<u> </u>		,
	(Name of Corporation)		
P18000005619			
	, a corporation organized under the law	ws of the State of	
(Document Number, if known) Florida			
	 ·	202 S. S. S	
		2021 NOV -5	لآ
	a de		= T
	(Signature of resigning officer/director)	AM 10: 32	ジ
		ć	S

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