

P1800000 8778

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

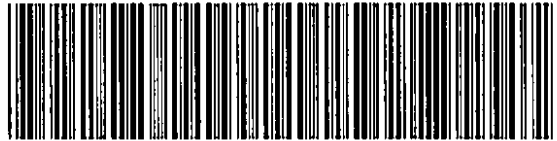
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Spoke with Mr. Lewis on 8/12/20
He said to proceed with the
off/Direct removal filing.

[Signature]

Office Use Only



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010-R519M

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sweetman Management Inc
(Name of Corporation)

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:

DAMIAN LEWIS
(Name of Person)

Sweetman Management
(Name of Firm/Company)

9897 Fairway Cove Ln
(Address)

Plantation FL 33324
(City/State and Zip Code)

For further information concerning this matter, please call:

DAMIAN LEWIS at (954) 774-0383
(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

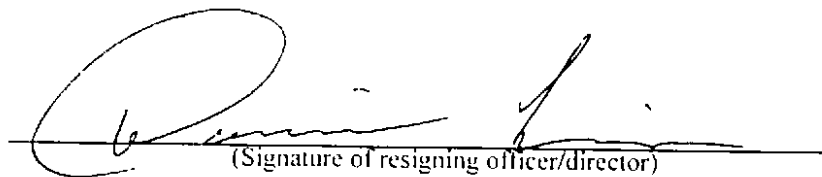
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I. DAMIAN lewis, hereby resign as Partner/Director
(Title)

of Sweetman Management Inc.
(Name of Corporation)

P1800008778
sweetman management, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

2020 JUN 24 PM 2:56

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