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Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	
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Office Use Only



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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Remova & Afficer name (Name of Corporation) DOCUMENT NUMBER: P18000 3746
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Christine Harris (Name of Person)
Divier Lewis & Associates, Inc Sorry Send to
1700 15 the 1244 store number 8421 Nu (Address) 25th Street
West Palm Beach It 33+07 Surrise, Flack (City/State and Zip Code) 3337
For further information concerning this matter, please call:
(Name of Person) at (502) 428-8802 (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

Sorry so messy mail confirmation into to Return address On letter Thank you have a great day

CR2E044 (05/13)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, Christine Harris, hereby resign as Office	itle)		_
	- <u>hc,</u>	,	
P15(00013746, a corporation organized under the laws of the (Document Number, if known)	State of		
Florida	- SS	201	
	CRE I'AI	2018 AUG 14	7
Charling Sams	RY OF S	₽ PHE	
(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