

P180000017694

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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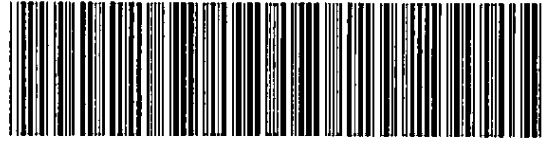
(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Celupal Worldwide Industries, Inc.  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P 18000017694  
\_\_\_\_\_

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kathleen Poole  
\_\_\_\_\_  
(Name of Person)

Celupal Worldwide Industries Inc.  
\_\_\_\_\_  
(Name of Firm/Company)

PO BOX 3179  
\_\_\_\_\_  
(Address)

Tequesta, FL 33469  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Kathleen Poole at ( 561 ) 307-0796  
\_\_\_\_\_  
(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, Connie Harding, hereby resign as Secretary  
(Title)

of Celupal Worldwide Industries Inc.  
(Name of Corporation)

P 18000017694  
(Document Number, if known), a corporation organized under the laws of the State of

Florida  
\_\_\_\_\_

\_\_\_\_\_  
(Signature of resigning officer/director)

Aug 16, 2021

**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