

P180000 21011

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

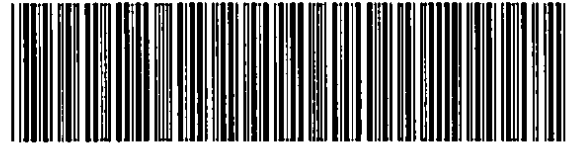
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS
2020 MAR -6 AM 11:31

GM
3/19/20

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WA SOLUTIONS CORP
(Name of Corporation)

DOCUMENT NUMBER: D 180 000 21 011

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

Please return all correspondence concerning this matter to the following:

WELLINGTON ROSAIBO BRITO M SILVA
(Name of Person)

WA SOLUTIONS CORP
(Name of Firm/Company)

12559 FOYNES AVE
(Address)

WINDERMERE, FL 34786
(City/State and Zip Code)

For further information concerning this matter, please call:

WELLINGTON R. B. M SILVA at (407) 760. 8242
(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, ALEXSANDRA FERNANDES BRITO DA SILVA, hereby resign as P
(Title)

of WA SOLUTIONS CORP
(Name of Corporation)

P18000021011, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Alexandra F. B. da Silva
(Signature of resigning officer/director)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2020 MAR -6 AM 11:31

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