P18000086424

_____
(Requestor's Name)

_____
(Address)

_____
(Address)

_____
(City/State/Zip/Phone #)

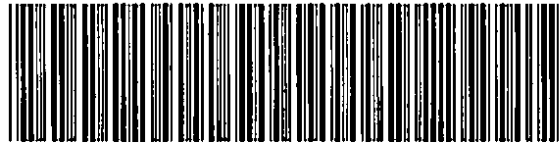☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
(Business Entity Name)

_____
(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

O/D Resignation

FLJ
D CUSHING

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TruAlchemy Productions Inc.
_____
(Name of Corporation)

DOCUMENT NUMBER: P18000086424
_____

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

Please return all correspondence concerning this matter to the following:

Jaclyn Truman
_____
(Name of Person)

TruAlchemy Productions Inc.
_____
(Name of Firm/Company)

10637 Sandridge Court
_____
(Address)

Orlando, FL 32817
_____
(City/State and Zip Code)

For further information concerning this matter, please call:

Jaclyn Truman   407   307-6288
_____ at (_____)_____
(Name of Person)   (Area Code & Daytime Telephone Number)

Enclosed is a check for $35.00 made payable to the Florida Department of State.

<table>
<tr><td>Mailing Address:</td><td>Street Address:</td></tr>
<tr><td>Amendment Section</td><td>Amendment Section</td></tr>
<tr><td>Division of Corporations</td><td>Division of Corporations</td></tr>
<tr><td>P.O. Box 6327</td><td>The Centre of Tallahassee</td></tr>
<tr><td>Tallahassee, FL 32314</td><td>2415 N. Monroe Street, Suite 810</td></tr>
<tr><td></td><td>Tallahassee, FL 32303</td></tr>
</table>

CR2E044 (05/13)

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

I, Laiken Lynn Wagenschnur , hereby resign as President, CEO, COO

(Title)

of TruAlchemy Productions Inc.

(Name of Corporation)

P18000086424 , a corporation organized under the laws of the State of

(Document Number, if known)

Florida

(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