## P18000099688

(Requestor's Name)			
(Address)			
(Address)			
(City)Ct-to-Fig.(Db.one-th)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





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1/24/2023

## TRANSMITTAL LETTER

	Amendment Section Division of Corporations	
	CT: Making Way Inc	•
DOCUM	1ENT NUMBER: <u>\$ 180000 9</u>	4688
The enclo	osed Officer/Director Resignation for a Co	rporation and fee are submitted for filing.
Please ret	turn all correspondence concerning this ma	ntter to the following:
	Name of Person)	
	Malany Way, Inc (Name of Firm/Company)	
2342	2 SE Masjan Ave (Address)	
Port	4 St. Lucil, FL 34952 (City/State and Zip Code)	
For further	er information concerning this matter, plea	ase call:
Ryai	Name of Person) at (	Nrea Code & Daytime Telephone Number)
Enclosed	l is a check for \$35.00 made payable to the	Florida Department of State.
	<u>lailing Address:</u> Amendment Section	Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street. Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1. Nivile Fouler	hereby resign as <u>President, Secretary and C</u>
of Making Way, Inc.	d'Corporation)
(Document Number, if known)	_ a corporation organized under the laws of the State of
Florila	-•
	PECKLIANA TALLANA
***	gnature of resigning officer/director)  77  77  77  77  77  77  77  77  77

## 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