P190000 43623

(Re	equestor's Name)	_
(Ac	ldress)	
(Address)		
(Cir	ty/State/Zip/Phone	#)
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Special Instructions to Filing Officer:		
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Y SULKER APR 23 2020

TRANSMITTAL LETTER

SUBJECT: MLB BOCA FAC (Name of Corporation) DOCUMENT NUMBER: P19000043623
DOCUMENT NUMBER: P190000 43623
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
BRUCE Zipes
(Name of Person)
(Name of Firm/Company) DBA BrukeSA GREAT Neck
19575 S. SATE RD #7
19575 S. STATE RD # 7 (Address) BOCA RADN 7/ 33498 (City/State and Zip Code)
For further information concerning this matter, please call:
Rame of Person) at (516) 423-3678 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Mailing Address: Street Address:

Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

TO: Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

• • • •

1,BMCC_	ZUPS_, hereby resign as_	Vice Presiden T
of	DECA JUC (Name of Corporation)	·
(Document Number, if known	a corporation organized unc	der the laws of the State of
FloriDA	·	
		2020 APR 13
	(Signature of resigning officer/direct	
		PH 12: 39

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