

PI9 000060978

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

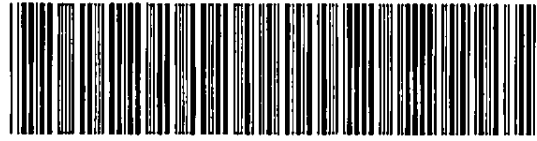
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300336314973 ✓

11/07/19--01007--010 \*\*\$5.00

S TALLFNT  
DEC 07 2019

FILED  
2019 NOV -7 AM 10:19  
STATE OF MISSISSIPPI  
RECORDS & ADMINISTRATION

*D/D-Resign*

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** INNEVOLUTION, INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P19000060978

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

Please return all correspondence concerning this matter to the following:

**MANUEL CASTILLO**

(Name of Person)

**INNEVOLUTION, INC**

(Name of Firm/Company)

**9441 SUNRISE LAKES BLVD, #101**

(Address)

**SUNRISE, FL 33322**

(City/State and Zip Code)

For further information concerning this matter, please call:

**MANUEL CASTILLO** at ( **954** ) **669-2817**  
(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  
2661 Executive Center Circle  
Tallahassee, FL 32301

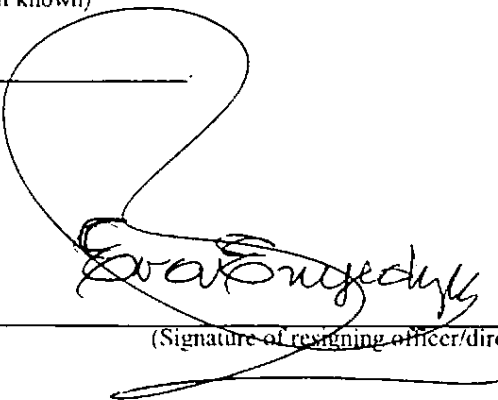
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, EVA ENYEDY, hereby resign as DIRECTOR  
(Title)

of INNEVOLUTION, INC  
(Name of Corporation)

P19000060978, 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**

**FILED**  
2019 NOV -7 AM 10:19  
OFFICE OF THE STATE  
CLERK

**Make checks payable to Florida Department of State and mail to:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314