

P19000078326

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

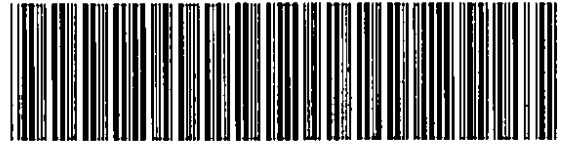
(Business Entity Name)

(Document Number)

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CLERK OF COURT

old Resignation

CLERK OF COURT

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: COGNISPAN, INC
(Name of Corporation)

DOCUMENT NUMBER: P19000078326

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

Please return all correspondence concerning this matter to the following:

Cleveland J Benning III
(Name of Person)

COGNISPAN, INC
(Name of Firm/Company)

11793 W. Atlantic Blvd #33
(Address)

Coral Springs, FL 33071
(City/State and Zip Code)

For further information concerning this matter, please call:

Cleveland J Benning at (954) 632-7786
(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

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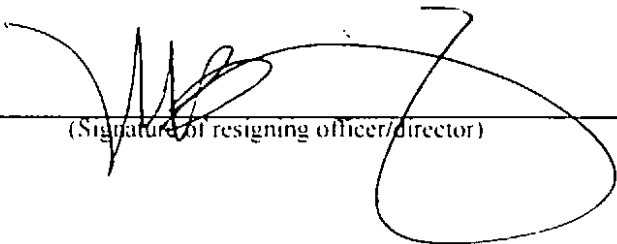
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Margot Benning, hereby resign as CFO
(Title)

of COGNISPAN, INC.
(Name of Corporation)

P19000078326, 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

20 OCT 29 11:30