PZO 0000 19280

(Requestor's Name)	
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
(expression 2.p.) Hence //	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	١
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Synkron BioScience Corporation	
	(Name of Corporation)
DOCUMENT NUMBER: P20000019280	
The enclosed Officer/Director Resignation	n for a Corporation and fee are submitted for filing.
Please return all correspondence concerning	ng this matter to the following:
Kim Andrews	
(Name of Person)	
Bogart Labs, LLC	
(Name of Firm/Company)
1229 2nd Street	
(Address)	· - · · · · · · · · · · · · · · ·
Sarasota, FL 34236	
(City/State and Zip Code))
For further information concerning this ma	atter, please call:
Kim Andrews	941 260.9971
(Name of Person)	at () (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payal	ble to the Florida Department of State.
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Shelby Isaacson	Managing Pa 	Managing Partner , hereby resign as	
		(Title)	
Synkron Biosciences Corp			
	(Name of Corporation)		
22000019280	, a corporation organized under the lav	vs of the State of	
(Document Number, if kr	own)		
Florida	<u>.</u>		
	1 11		
	Lolly !	5.	
	(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