

P20000047143

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

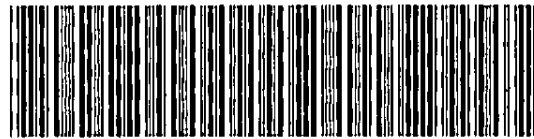
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CLERK OF STATE
TALLAHASSEE, FLORIDA

VO/D

Resign.

10/19/20

DC

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SANICASH INC.
(Name of Corporation)

DOCUMENT NUMBER: P20000047143

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

Please return all correspondence concerning this matter to the following:

Mark Lyle

(Name of Person)

N/A

(Name of Firm/Company)

4022 Eagle Nest Dr.

(Address)

Hernando Beach, FL 34607

(City/State and Zip Code)

For further information concerning this matter, please call:

Mark Lyle

(Name of Person)

at (727) 859-3512
(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

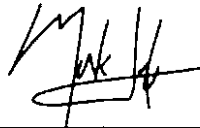
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Mark Lyle, hereby resign as Director
(Title)

of SANICASH INC.
(Name of Corporation)

P20000047143, 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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

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