

P20 0000 83957

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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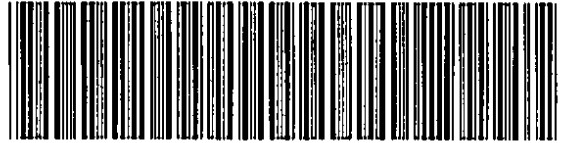
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FL

2022 AUG 11 PM 3:22

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: STRUGGLAZKLUB, INC.

(Name of Corporation)

DOCUMENT NUMBER: P20000083957

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

Please return all correspondence concerning this matter to the following:

LYONEL BROWN

(Name of Person)

STRUGGLAZKLUB, INC.

(Name of Firm/Company)

7744 BOREAS DR

(Address)

ORLANDO, FL 32822

(City/State and Zip Code)

For further information concerning this matter, please call:

ROSALIND JOHNSON

(Name of Person)

at (407) 468-3601
(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**

FILED

2022 AUG 11 PM 3:22

SECRETARY OF STATE
TALLAHASSEE, FL

I, ROSALIND JOHNSON, hereby resign as DIRECTOR OF MARKETING
(Title) VP OF MANS WU

of STRUGGLAZKLUB, INC.
(Name of Corporation)

P20000083957, 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