P20000095118

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
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(Business Entity Name)		
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Keep Evolving Beyond Therapy Inc.			
(Name of Corporation)			
DOCUMENT NUMBER: P20000095118			
The enclosed Officer/Director Resignation for a Corporation	n and fee are submitted for filing		
Please return all correspondence concerning this matter to t	he following:		
Melissa Crawford			
(Name of Person)	-		
(Name of Firm/Company)	-		
1284 Gorham St			
(Address)	-		
Jacksonville, FL 32226			
(City/State and Zip Code)	-		
For further information concerning this matter, please call:			
Melissa Crawford 904 at (662-4948) le & Daytime Telephone Number)		
(Name of Person) (Area Cod	e & 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 PHIZE 50

Melissa Crawford	CFO , hereby resign as	1 / C) x		
*	, nereoy reeign de	(Title)		
Keep Evolving Beyond Therapy I	(Name of Corporation)			
P20000095118	(Name of Corporation)			
(Document Number, if known	, a corporation organized under the	, a corporation organized under the laws of the State of		
Florida				
	 '			

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