

P220000039607

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

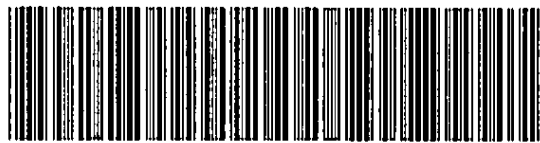
(Business Entity Name)

(Document Number)

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13

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RESIGNING FROM THE BOGINI INC. PRESIDENT/OFFICER ANY AND ALL STOCK

(Name of Corporation)

DOCUMENT NUMBER: P22000039607

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

Please return all correspondence concerning this matter to the following:

KELLY CLAEYS

(Name of Person)

BOGINI INC.

(Name of Firm/Company)

747 SOUTH RIDGEWOOD AVE., SUITE 101

(Address)

DAYTONA BEACH , FL 32114

(City/State and Zip Code)

For further information concerning this matter, please call:

ELIZA HOPE, ESQ.

(Name of Person)

at (813) 600-8695
(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

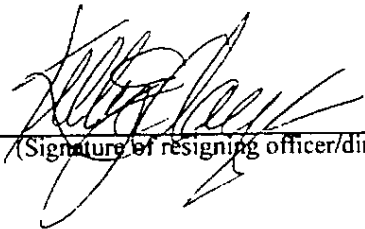
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, KELLYCLAEYS, hereby resign as TITLE P
(Title)

of BOGINI INC.
(Name of Corporation)

P22000039607, 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

STATE TALLY OF FLORIDA
TALLAHASSEE, FLORIDA

2022 JUN 13 AM 11:15

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