## P22000053176

(Requestor's Name)	
(Address)	_
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
ed Copies Certificates of Status	
	_
ial Instructions to Filing Officer:	
J. HORNE JAN 24 2023	
JAN 2 4 200	
<del></del>	_

Office Use Only



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SEP 24 2022





## TRANSMITTAL LETTER

Amendment Section Division of Corporations

O:

UBJECT:	(Name of Corporation)
OCUMENT NUMBER: P22000053176	
he enclosed Officer/Director Resignation	for a Corporation and fee are submitted for filing
lease return all correspondence concernir	ng this matter to the following:
GRACIELA BRANDT	
(Name of Person)	<del></del>
/OUARYQU INC.	
(Name of Firm/Company)	
348 NW 113 TERRACE	
(Address)	
ORAL SPRINGS, FL 33071	
(City/State and Zip Code)	
or further information concerning this ma	itter, please call:
GRACIELA BRANDT	at (954 ) 253-1051 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Inclosed is a check for \$35,00 made payal	ble to the Florida Department of State.
Mailing Address:	Street Address:
Amendment Section Division of Corporations	Amendment Section 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

CLEMENCIA DOBIECKI	, hereby resign as
· ;	(Title)
VOLUMPOR INC	
YOUARYOU INC.	
(Name	e of Corporation)
P22000053176	, a corporation organized under the laws of the State of
(Document Number, if known)	
Florida	
	·
	Oftobrucki.
	Towns V.
	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