)69647 P22000

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

TO: Amendment Section Division of Corporations

MEERKAT COMPANY, INC. SUBJECT:

(Name of Corporation)

DOCUMENT NUMBER: P22000069647

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

Please return all correspondence concerning this matter to the following:

BRIAN ALVAREZ

(Name of Person)

LIONZ, LLC

(Name of Firm/Company)

4881 POST POINTE DRIVE

(Address)

SARASOTA, FL 34233

(City/State and Zip Code)

For further information concerning this matter, please call:

BRIAN ALVAREZ

(Name of Person)

at (______) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

<u>Mailing Address:</u> 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 \mathbb{T} PH 2: 11 SECRETARY BRIAN H. ALVAREZ _____, hereby resign as S Ι. _ . . . (Title) 69 MEERKAT COMPANY, INC. (Name of Corporation) P22000069647 _____. a corporation organized under the laws of the State of

• •

(Document Number, if known)

FLORIDA

Brian Harrison Alvarez (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