# P23000059916

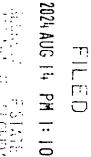
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer.	
J. HORNE AUG 23 2024	

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08/14/24--01029--010 \*\*35.00



# TRANSMITTAL LETTER

FO: Amendment Section Division of Corporations  Puzzle Inc.
SUBJECT: TO Z G Z Z P PUZZETOC (Name of Corporation)
DOCUMENT NUMBER: <u>P230006 599 7 6</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Debra Lieven (Name of Person)
Trazazzle Puzzle Inc. (Name of Firm/Company)
1251 Rambling Vine Ct
Trinty FL 34655 (City/State and Zip Code)
For further information concerning this matter, please call:
Dbra Lieve at (727) 247-9[3] (Name of Person) at (727) (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

2024 AUG 14 PM 1:10

i, <u>Debra L. Liev</u>	hereby resign as Treasure (Title)
of Trazazzle Pur	2 le In C ame of Corporation)
P23000059976 (Document Number, if known)	, a corporation organized under the laws of the State of
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 Tailahassee, Florida 32314