

P23000084820

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

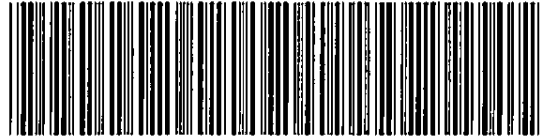
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CLERK OF SUPERIOR COURT
JANUARY 1, 2025

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: S&J cape enterprise Inc

(Name of Corporation)

DOCUMENT NUMBER: P23000084820

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

Please return all correspondence concerning this matter to the following:

Md Saifo uddin

(Name of Person)

S&J cape enterprise Inc

(Name of Firm/Company)

7200 N Atlantic ave

(Address)

Cape canaveral, FL 32920

(City/State and Zip Code)

For further information concerning this matter, please call:

Md Saifo uddin

305

7809539

at (

_____) _____

(Name of Person)

(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, Md Saifuddin, hereby resign as PDTS
(Title)

of S&J cape enterprise Inc
(Name of Corporation)

P23000084820, 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

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