P24000037440

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(10	arcssy	
(Cit	y/State/Zip/Phone	e #)
PłCK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
	 	





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ALC TANAL PROPER

S. PRATHER

TRANSMITTAL LETTER

TO: * Amendment Section Division of Corporations

PAUSIN, INC		
SUBJECT:	(Name of Corporation)	
DOCUMENT NUMBER: P24000037440		
The enclosed Officer/Director Resignation	for a Corporation and fee are submitted for filing	
Please return all correspondence concernir	ng this matter to the following:	
SINISA MIKALACKI		
(Name of Person)		
(Name of Firm/Company))	
711 N. NORTHLAKE DRIVE		
(Address)		
HOLLYWOOD, FLORIDA 33019		
(City/State and Zip Code)		
For further information concerning this ma	atter, please call:	
SINISA MIKALACKI	at (786 200-3586) (Area Code & Daytime Telephone Number)	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for \$35.00 made payal	ble to the Florida Department of State.	
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations	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

PAULA MIKALACKI I,			
	VICE PRESIDENT, hereby resign as(Title)	· · · · · · · · · · · · · · · · · · ·	
PAUSIN, INC			
01	(Name of Corporation)		1
P24000027440	, a corporation organized under the laws of the Sta	ite of	
FLORIDA			
	(Signature of resigning officer/director)		2024 3111
		15 15 10 10 10 10 10 10 10 10 10 10 10 10 10	E 13 Mil
	FILING FEE IS \$35.00	C) = 1	:

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314