

P93000052847

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

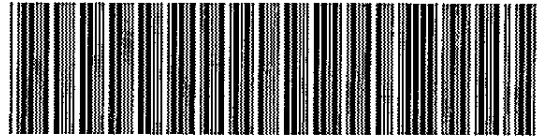
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TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Wil 'N Joy, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P93000052847

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

Please return all correspondence concerning this matter to the following:

Joyce Imondo

(Name of Person)

Wil 'N Joy, Inc.

(Name of Firm/Company)

314 S.E. 4th St.

(Address)

Dania, Fl 33004

(City/State and Zip Code)

For further information concerning this matter, please call:

Joyce Imondo

(Name of Person)

at ( 954 ) 558-3976

(Area Code & Daytime Telephone Number)

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

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Mailing Address:**

Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, JOYCE IMONDO  
Joyce Imondo, hereby resign as PRESIDENT - SECRETARY  
(Title) - TREASURER  
of WIL 'N JOY, INC  
(Name of Corporation)

P93000052847, a corporation organized under the laws of the State of  
(Document Number, if known)

Joyce Imondo  
(Signature of resigning officer/director)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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