## P940000665248

(Re	equestor's Name)	1
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



200340595902

02/18/20--01010--019 \*\*35.00

SECRETARY OF STATE SECRETARY OF STATE

QM 3/9/20

## TRANSMITTAL LETTER

TO:	FO: Amendment Section Division of Corporations		
SUBJ	ECT: E3 Finess (Name	of Corporation)	
DOC	UMENT NUMBER: P940006	5248	
The e	nclosed Officer/Director Resignation for a Co	orporation and fee are submitted for filing.	
	return all correspondence concerning this m		
<u>m</u>	(Name of Person)	<del></del>	
	E3 FIT YELL INC (Name of Firm/Company)	<del>,</del>	
	23477 Water CIRCI (Address)	- &	
	BOCA RATIN FL. 3349 (City/State and Zip Code)	3.6	
For fi	urther information concerning this matter, ple	ase call:	
m	(Name of Person) at (	(Area Code & Daytime Telephone Number)	
Enclo	osed is a check for \$35.00 made payable to th	e 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

(Name of Corporation)  9400065248  A corporation organized under the laws of the State of (Document Number, if known)  FLorida  Muchael & Famh	Michael Fo	VANK	, hereby resign as	(Title)
(Document Number, if known)  FLociDA	E3 FITTE	(Name of Corpo	ristion)	
	94000065248 (Document Number, if kn	a cor	poration organized und	ler the laws of the State of
$\mathcal{D}_{n}$ / / $\mathcal{O}$	FLORIDA	•		
$\mathcal{D}_{n}$ / / $\mathcal{O}$				
Muhuel Tur	m	hul 0 =	L.	

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 9898 FEB 18 AM 9: 09