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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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TRANSMITTAL LETTER

11 . 2 . 1
SUBJECT: Howard Street Dryclan Inc. (Name of Corporation)
DOCUMENT NUMBER: P97 00005720
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Daya Hill (Name of Person)
(Name of Firm/Company)
230 Court St. SE (Address)
Live Del (City/State and Zip Code)
For further information concerning this matter, please call:
Dava Hill at (386) 312-Gib (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

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Mailing Address:

P.O. Box 6327

Amendment Section

Division of Corporations

Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1. Samuel D. Skierski hereby resign as Director	itle)		
of Howard Street Dyclam, The. (Name of Corporation)		<u> </u>	
(Document Number, if known), a corporation organized under the laws of the	e State of		
Florida			
(Signature of resigning officer/director)		2020 JAN -6 F	·
		P# 1:5	

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