

P98000001915

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

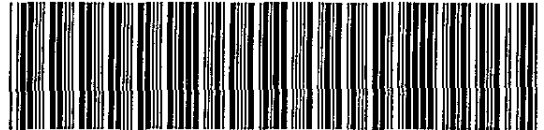
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SANDERFORD PRODUCTIONS, INC
(Name of Corporation)

DOCUMENT NUMBER: P98000001915

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

JAMEI L. SANDERFORD, SR.
(Name of Person)

SANDERFORD PRODUCTIONS, INC
(Name of Firm/Company)

1372 WATERWAY COVE DR
(Address)

WELLINGTON, FL 33414
(City/State and Zip Code)

For further information concerning this matter, please call:

JIM L. SANDERFORD, SR at (561) 712-1690
(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
409 E. Gaines Street
Tallahassee, FL 32399

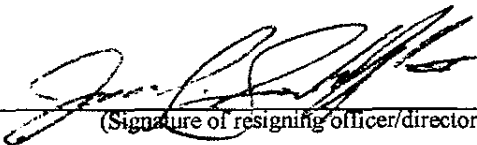
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, JAMES L. SANDERFORD, JR., hereby resign as VICE PRESIDENT
(Title)

of SANDERFORD PRODUCTIONS, INC.
(Name of Corporation)

P98000001915, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

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CLERK 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