

N17612

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200419805722

12/13/23--01018--015 **35.00

FILED

2023 DEC 13 AM 10:39

STATE
TALLAHASSEE, FL

1/12

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Wellington M Condominium Association, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N17612

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

Please return all correspondence concerning this matter to the following:

Roxanne K. Mutchler
(Name of Person)

(Name of Firm/Company)

304 Wellington M
(Address)

West Palm Beach, FL 33417
(City/State and Zip Code)

For further information concerning this matter, please call:

Roxanne Mutchler at (315) 868-5020
(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Roxanne K. Mutchler, hereby resign as Secretary
(Title)

of Wellington M Condominium Association, Inc.
(Name of Corporation)

N17612, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Roxanne K. Mutchler
(Signature of resigning officer/director)

SECRETARY
STATE
TALLAHASSEE, FL.

2023 DEC 13 AM 10:39

FILED

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