

PO2000117004

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

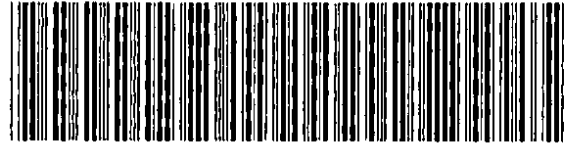
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08/15/23--01012--001 **35.00

FILED
23 AUG 15 AM 11:24
CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: JACKSONVILLE PROFESSIONAL MANAGEMENT, INC.

(Name of Corporation)

DOCUMENT NUMBER: P02000117004

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

Please return all correspondence concerning this matter to the following:

DAWN R MOERINGS

(Name of Person)

JACKSONVILLE PROFESSIONAL MANAGEMENT, INC

(Name of Firm/Company)

2410 ORMSBY CIRCLE W.

(Address)

JACKSONVILLE, FL 32210

(City/State and Zip Code)

For further information concerning this matter, please call:

DAWN MOERINGS

904

355-0800

(Name of Person)

at (

(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**

FILED
23 AUG 15 AM 11:25
TALLAHASSEE, FLORIDA

I, BRIDGET H WARE, hereby resign as SECRETARY
(Title)

of JACKSONVILLE PROFESSIONAL MANAGEMENT, INC.
(Name of Corporation)

P02000117004, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Bridget H Ware
(Signature of resigning officer/director)

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