

P04 0000 97756

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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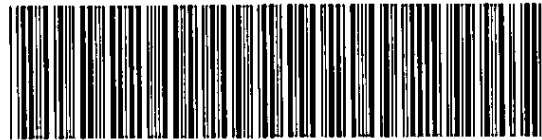
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

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11/2/21

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BUSINESS PLANNING ASSOCIATES OF SARASOTA, INC.
(Name of Corporation)

DOCUMENT NUMBER: P04000097756

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

JOHN A T WILSON
(Name of Person)

BUSINESS PLANNING ASSOCIATES OF SARASOTA, INC.
(Name of Firm/Company)

7239 KENSINGTON COURT
(Address)

UNIVERSITY PARK FL 34201-2347
(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN A T WILSON at (941) 360-2975
(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, JOHN A T WILSON, hereby resign as PRESIDENT
(Title)

of BUSINESS PLANNING ASSOCIATES OF SARASOTA, INC.
(Name of Corporation)

P04000097756, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

X *John A. T. Wilson* 6 March 2021
(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

SECRETARY OF STATE
TALLAHASSEE, FL

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