

120001081081

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

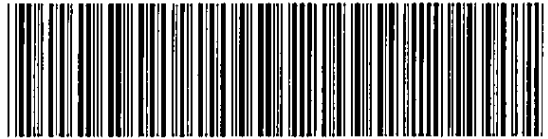
(Business Entity Name)

(Document Number)

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02/22/24 AM 7:00

A. HUNT

02/22/24

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

Best Rental Place, Inc.

SUBJECT: _____
(Name of Corporation)

P1200010-4086

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Samuel Nehme Bousada

(Name of Person)

Best Rental Place, Inc.

(Name of Firm/Company)

11705 3rd St. E. Suite 9

(Address)

Treasure Island, Florida 33706

(City/State and Zip Code)

For further information concerning this matter, please call:

Albert Monsour 613 299-9400

_____ at (_____) _____
(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

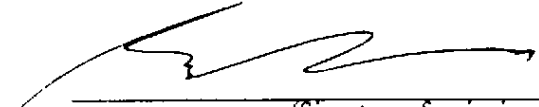
RECEIVED 2 AM 7:00
STATE OF FLORIDA
TALLAHASSEE, FL
ED

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

Samuel Nehme Bousada President
I, _____, hereby resign as _____
(Title)

Best Rental Place, Inc.
of _____
(Name of Corporation)

P12000104086
_____, a corporation organized under the laws of the State of
(Document Number, if known)
Florida



(Signature of resigning officer/director)

2024 FEB 22 AM 7:00
STATE OF FLORIDA
TALLAHASSEE, FL
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