

120001081081

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

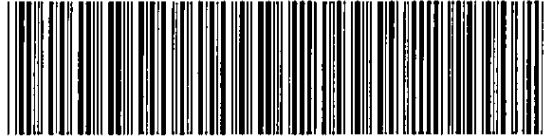
(Business Entity Name)

(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

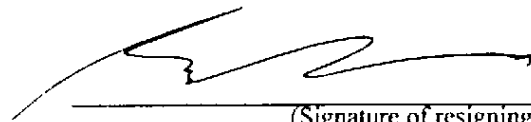
RECEIVED 2 AM 7:00  
STATE OF FLORIDA  
TALLAHASSEE, FL  
ED

**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  
TALLHASSEE, FL

**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