

688470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

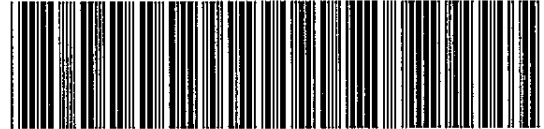
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: David A. Namoff D.D.S, PA
(Name of Corporation)

DOCUMENT NUMBER: 688470

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

Please return all correspondence concerning this matter to the following:

Aurelio J. Fernandez
(Name of Person)

Namoff D.D.S and Fernandez DMD, PA
(Name of Firm/Company)

8500 West Flagler Street Ste A-101
(Address)

Miami Florida 33144
(City/State and Zip Code)

For further information concerning this matter, please call:

Aurelio J. Fernandez at (305) 552-1133
(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
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED

04 SEP 27 PM 2:07

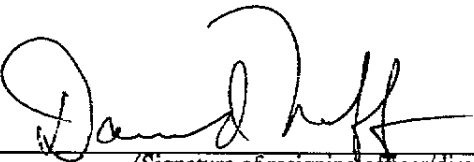
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

I, David A. Namoff, hereby resign as president
(Title)

of David A. Namoff D.D.S, PA
(Name of Corporation)

688470, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(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