6684199

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TO:	Amendment Section Division of Corporations
SUB	JECT: Port Side Sailing Rentals, Inc.
	(Name of Corporation)
DOG	CUMENT NUMBER: 668 499
The	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Pleas	se return all correspondence concerning this matter to the following:
Joh	anna J. Pohlmann
	(Name of Person)
Por	t Side Sailing Rentals, Inc dba Coastal Canvas
	(Name of Firm/Company)
302	3 Westfield Road
	(Address)
Gul	f Breeze, FL 32561
· · · · · · · · · · · · · · · · · · ·	(City/State and Zip Code)
For f	urther information concerning this matter, please call:
Rob	ert L. Pohlmann at (850) 932-6233 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Encl	osed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divis Clifto 2661	Mailing Address: Amendment Section Amendment Section Division of Corporations on Building Executive Center Circle hassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Johanna J. Pohlmann	, hereby resign as_	Officer/Director	
-1	,,g	(Title)	
of Port Side Sailing Rentals, Inc.	ation)		
1184100		nder the laws of the State of	
Florida			
Chons (Signature of	Policer/direct	ا 🕿 الدلات	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