

746349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

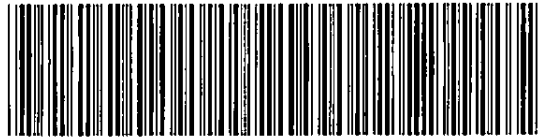
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Woods of Port St. John POA
(Name of Corporation)

DOCUMENT NUMBER: 746349

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

Please return all correspondence concerning this matter to the following:

Richard Preitz

(Name of Person)

Woods of Port St John HOA

(Name of Firm/Company)

925 Macco Road

(Address)

Port St John, FL 32927

(City/State and Zip Code)

For further information concerning this matter, please call:

Richard Preitz at (516) 769-2481
(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

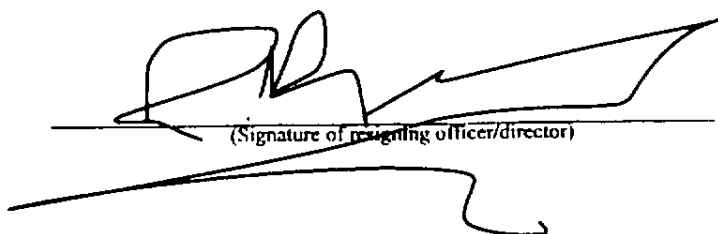
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Richard Preitz, hereby resign as President
(Title)

of The Woods of Port St John Property Owners
(Name of Corporation) Association, INC

746349, 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

Vertical text on the right margin, possibly a stamp or reference number.