F19000002922

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.





700414822287

09/01/23--01014--009 **35.00

Amendment Section Division of Corporations

TO:

TRANSMITTAL LETTER

SUBJECT: Atlas Title Company	(Name of Corporation)
	(Name of Corporation)
DOCUMENT NUMBER: F19000002922	
The enclosed Officer/Director Resignation	n for a Corporation and fee are submitted for filing.
Please return all correspondence concerni	ng this matter to the following:
Lisa Hill	
(Name of Person)	
Atlas Title Company	
(Name of Firm/Company	<u>')</u>
12724 Gran Bay Parkway West	
(Address)	
Jacksonville, FL 32258	
(City/State and Zip Code)
For further information concerning this m	atter, please call:
Lisa Hill	949 946-4281
(Name of Person)	at (949 946-4281 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made paya	able to the Florida Department of State.
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Ricky Massie I,	Director , hereby resign as
11	(Title)
Atlas Title Company of	
(Name of Corporation)
(Document Number, if known)	, a corporation organized under the laws of the State of
Delaware	,
 	Docusigned by: 72 M- 55108F8B7FD03AB. (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