

NO1000003919

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

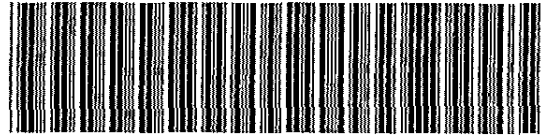
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dr. Notes Research Foundation, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N01000003919

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Robert L. Shearin
(Name of Person)

Robert L. Shearin, P.A.
(Name of Firm/Company)

20283 State Road 7, Suite 300
(Address)

Boca Raton, FL 33498
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert L. Shearin at (561) 482-9314
(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
05 MAR 28 AM 10 30
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

I, Conrado Garcia, hereby resign as Director (Title)
of Dr. Notes Research Foundation, Inc. (Name of Corporation)
N01000003919, 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