NO5 000009017

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



300374701243

10/13/21--01014--013 **55.00



0,

C. BRUMBLEY

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: The Villas at Tramore Condominium Association Inc (Name of Corporation)
DOCUMENT NUMBER: NØ5ØØØØØ9 Ø17
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Vanet Curley (Name of Person)
Name of Firm/Company)
55 Aspen Drive (Address)
Bridgewater, MA 02324 (City/State and Zip Code)
For further information concerning this matter, please call:
Janet Curley (Name of Person) at (508) 697-0584 (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

of The Villas at Transcre Condominium Association, Inc. (Name of Corporation)	
(Name of Corporation)	•
NØ5000000000000000000000000000000000000	ŋ
Signature of resigning officer/flirector)	ーのフの

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