

NOL00000008740

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

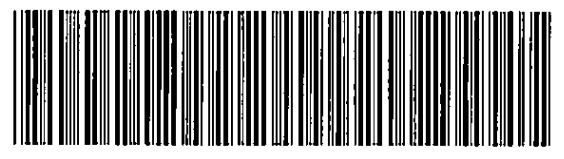
(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** 2701 PGA Boulevard Condominium Association, Inc.  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** N06000008740  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Mark R. Murray  
\_\_\_\_\_  
(Name of Person)

The Gamot Law Firm  
\_\_\_\_\_  
(Name of Firm/Company)

c/o 6029 180th Street North  
\_\_\_\_\_  
(Address)

Jupiter, Florida 33458  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Mark R. Murray at (561) 685-3817  
\_\_\_\_\_  
(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:**

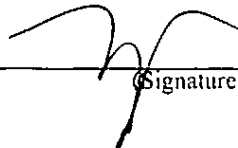
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Mark R. Murray, hereby resign as VP, Secretary, Treasurer  
(Title)

of 2701 PGA Boulevard Condominium Association, Inc.  
(Name of Corporation)

N06000008740, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

  
\_\_\_\_\_  
(Signature of resigning officer/director)

FILED  
2024 JUN 13 AM 7:00

**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

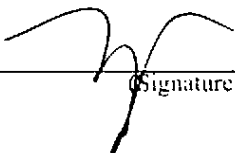
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(Document Number, if known)

Florida.

  
\_\_\_\_\_  
(Signature of resigning officer/director)

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2024 JUN 13 AM 7:05

**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