ND6336

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

Office Use Only



000322213350

12/26/18--01011--019 **35.04

FILED 2018 DEC 26 PM 4: 08 28F-SALSSEE TREBATOR

DDRES

JAN 07 2019 I ALBRITTON

TRANSMITTAL LETTER

Division of Corporations	
7919267BERMUDA OAKS OFFICE CONDOMINIUM ASSOCIATION, INC.	
(Name of Corporation)	
DOCUMENT NUMBER: N06336	
The enclosed Officer/Director Resignation for a Corporation and fee are submitted	for filing
Please return all correspondence concerning this matter to the following:	
John G. Blackburn	
(Name of Person)	
(Name of Firm/Company)	
1619 E. Vine Street	
(Address)	
Kissimmee, FL 34744	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
John G. Blackburn 3791-9267	
(Name of Person) (Area Code & Daytime Telephone N	Jumber)

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

TO:

Amendment Section

Street Address: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

CR2E044 (05/13)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, John G. Blackbur	n, hereby resign as Director
·····	(Title)
BERMUDA OAKS OFFI	CE CONDOMINIUM ASSOCIATION, INC.
(N	ame of Corporation)
N06336 (Document Number, it'known)	, a corporation organized under the laws of the State of
FLORDA	

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

