N1000000 | 1915

(Re	questor's Name)	
(Ad	dress)	
	dress)	
(10	uiess)	
(Cit	y/State/Zip/Phone #)
		_
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	<u> </u>
, , ,		,
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer.	





000440396180

12/08/24--01024--020 **35.00



TRANSMITTAL LETTER

ROYAL OAK MINISTRIES, INC.	
SUBJECT:(Name of Corpor	ration)
DOCUMENT NUMBER: N10000011915	
The enclosed Officer/Director Resignation for a Corporation	n and fee are submitted for filing
Please return all correspondence concerning this matter to the	ne following:
BRIENNE ROBERTSON	
(Name of Person)	
ROYAL OAK MINISTRIES	
(Name of Firm/Company)	
705 HARRISON STREET	
(Address)	•
TITUSVILLE, FL 32780	
(City/State and Zip Code)	•
For further information concerning this matter, please call:	
BRIENNE ROBERTSON 321 at (544-8549
(Name of Person) (Area Cod	e & 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



TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

DIRECTOR , hereby resign as
(Title)
Corporation:
a corporation organized under the laws of the State of
•

FILING FEE IS \$35.00

of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

