

N15000010006

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

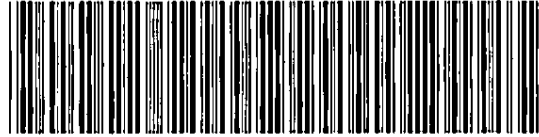
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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2022 FEB -4 AM 8:1  
TALLAHASSEE, FL

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TALLAHASSEE, FL

Y SULKER

FEB 07 2022

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-5437  
(850) 524-6243

**PLEASE USE FUNDS FROM ACCT: I20210000160 AMOUNT: 35.00**

**AUTHORIZATION SIGNATURE:**

**Fantastic Oceans, INC**

**N15000010006**

*James Full*

**Business Name**

**Document Number, (if known):**

☐ Walk in

☐ Pick up time

☐ Mail out

☐ Will wait

☐ Photocopy

☐ **Certified Copy of Articles of Organization**

☐ **Certificate of Status**

**NEW FILINGS**

☐ Profit

☐ Not for Profit

☐ Limited Liability

☐ Domestication

☐ Other

☐ **CORP**

**AMMENDMENTS**

☐ Amendment

☒ Resignation of R.A. Officer/Director

☐ Change of Registered Agent

☐ **Dissolution/Withdrawal**

☐ Merger

☐ **Conversion**

**OTHER FILINGS**

☐ Annual Report

☐ Fictitious Name

☐ APOSTIL ( )

**Country**

**REGISTRATION/QUALIFICATIONS**

☐ Foreign filing

☐ Limited Partnership

☐ Reinstatement

☐ Statement of Revocation of Dissolution

☐ Other

**EXAMINER'S INITIALS:** \_\_\_\_\_

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** FANTASTIC OCEANS, INC.  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** N15000010006  
\_\_\_\_\_

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 COOK  
\_\_\_\_\_

(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

2206 MILL ROAD  
\_\_\_\_\_

(Address)

RONKONKOMA, NEW YORK 11779  
\_\_\_\_\_

(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN COOK \_\_\_\_\_ at ( 305 ) 766-2611  
(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

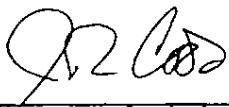
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, JOHN COOK, hereby resign as DIRECTOR  
(Title)

of FANTASTIC OCEANS, INC.  
(Name of Corporation)

N15000010006, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

FILED  
2022 FEB -4 AM 8:11  
TALLAHASSEE  
FLORIDA

**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