

16000006967

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
FILING OFFICE

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**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Oratory of St. Giles, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** N16000006967

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

Please return all correspondence concerning this matter to the following:

Oratory of St Giles, Inc.

(Name of Person)

Registered Agents, Inc.

(Name of Firm/Company)

3030 N Rocky Point Dr Ste 150A

(Address)

Tampa, FL 33607

(City/State and Zip Code)

For further information concerning this matter, please call:

Christopher Spray

(Name of Person)

at ( 404 ) 245-4362

(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:**

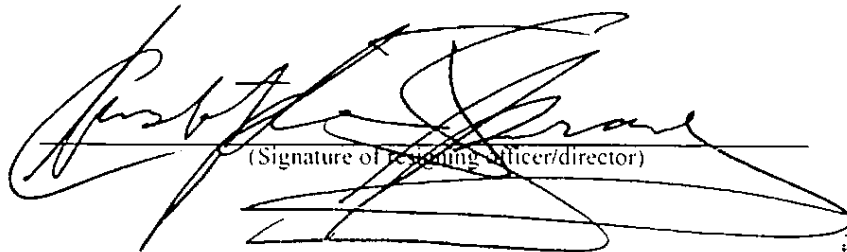
Amendment Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION

I, Christopher Spray, hereby resign as Treasurer/Director  
(Title)

of Oratory of St. Giles, Inc.  
(Name of Corporation)

N16000006967, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

  
(Signature of Resigning Officer/director)

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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TALLAHASSEE FLORIDA