

N20000007737

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

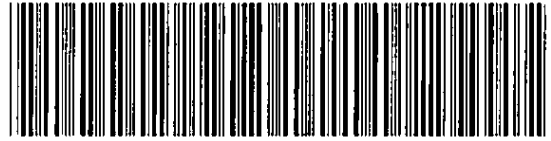
(Document Number)

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

Special Instructions to Filing Officer

10/19/23

Office Use Only



600417436466

10/19/23--01017--011 \*\*35.00

23 OCT 19 PM 5:19

OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION

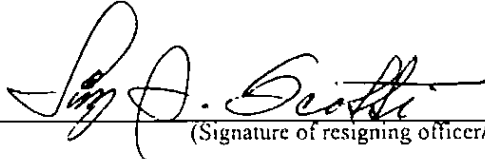
23 OCT 19 FRI 5:19

I, LUCY SCOTTI, hereby resign as DIRECTOR  
(Title)

of SOCIETY OF ST BARTHAELMEUS INC  
(Name of Corporation)

N20000007737, 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