

N210000003690

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

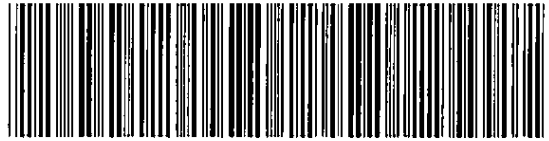
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

TIP MY EAR TNR AND RESCUE

SUBJECT: _____
(Name of Corporation)

DOCUMENT NUMBER: N21000003690 _____

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

Please return all correspondence concerning this matter to the following:

RUTH PENNINGTON

(Name of Person)

TIP MY EAR TNR AND RESCUE

(Name of Firm/Company)

11200 HARDING DRIVE

(Address)

PORT RICHEY FL

(City/State and Zip Code)

For further information concerning this matter, please call:

SHARON SCHEIBLEIN 727 457-2748

(Name of Person) at (_____) _____
(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**

CAROL SARAO BOARD MEMBER
I, _____, hereby resign as _____
(Title)

TIP MY EAR TNR AND RESCUE
of _____
(Name of Corporation)

N21000003690

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

Carol Sarao / ss 6/21/24
(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