

N21000008339

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

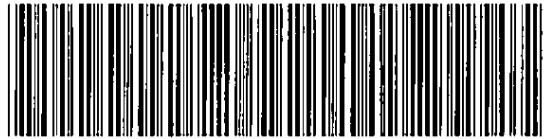
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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2023 APR 26 PM 1:00

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old Resignation

JUL 18 2023

D CUSHING

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

Monticello Historic Mainstreet Inc

SUBJECT: _____
(Name of Corporation)

DOCUMENT NUMBER: N21000008339 _____

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

Please return all correspondence concerning this matter to the following:

Victoria A Randle

(Name of Person)

(Name of Firm/Company)

728 Turney Anderson Road

(Address)

Monticello, FL 32344

(City/State and Zip Code)

For further information concerning this matter, please call:

Victoria A Randle

850

408-9760

(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

2023 APR 26 PM 1:00

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**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

Victoria A Randle President
I, _____, hereby resign as _____
(Title)

Monticello Historic Mainstreet Inc.
of _____
(Name of Corporation)

N21000008339

_____, 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

2023 APR 26 PM 1:00

6:34 PM