N21000008339

| (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: | | | | |
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TRANSMITTAL LETTER ' 🚗 👚

TO: Amendment Section Division of Corporations

| Monticello Historie Mainstreet Inc | | | | | |
|---|----------------|------------------------|----------------|---------------|---------------------|
| SUBJECT: | | | | | |
| (N N21000008339 DOCUMENT NUMBER: | Vanue of Corp | · | | | |
| The enclosed Officer/Director Resignation for | | | ed for filing. | | |
| Please return all correspondence concerning the Victoria A Randle | • | | J | | |
| (Name of Person) | | | | | |
| (Name of Firm/Company) 728 Turney Anderson Road | | _ | | _ | |
| (Address) | | | | 7023 APR | = : . |
| Monticello, FL 32344 | | | - : - ! | R 26 | |
| (City/State and Zip Code) | | | 21 | 고 : | • - - |
| For further information concerning this matter | r, please call | : | - | · | સ |
| Victoria A Randle | 850 | 408-9760 | , | T: 00 | |
| (Name of Person) | at ((Area Co | ode & Daytime Telephon | e 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

| Thomas J Randle | Director | Director | | | | |
|--|---|--------------------|---------|--|--|--|
| I, | hereby resign as | (Title) | (Title) | | | |
| Monticello Historic Mainstreet, I | ne. | | | | | |
| of | | | | | | |
| | (Name of Corporation) | | | | | |
| N21000008339 | | | | | | |
| | , a corporation organized under the lav | ws of the State of | | | | |
| (Document Number, if known) Florida | | | | | | |
| Thi | - omas Askandh | 2023 APR | | | | |
| | (Signature of resigning officer/director) | APR 26 P | | | | |

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