## N22000005962

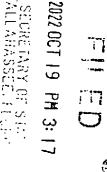
(Red	uestor's Name)	
(Add	lress)	
(Add	lress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	me)
(Doc	cument Number)	<del></del>
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
	LUODNE	:
J. HORNE		
JAN 17 2023		

Office Use Only



300394206633

09/13/23--61015--801 \*+35.00





## TRANSMITTAL LETTER

**TO:** Amendment Section Division of Corporations

Belleair Beach Community Foundation	n			
(Name of Corporation)				
DOCUMENT NUMBER:		<del> </del>		
The enclosed Officer/Director Resignation (	for a Corpora	ration and fee are submitted for filir		
Please return all correspondence concerning	this matter	to the following:		
Caroline Cornely				
(Name of Person)				
Belleair Beach Community Foundation				
(Name of Firm/Company)		<del></del>		
2204 Bayshore Drive				
(Address)	<del> </del>			
Belleair Beach Florida 33786				
(City/State and Zip Code)				
For further information concerning this mat	ter, please ca	all:		
Caroline Cornely	415	419-4099		
(Name of Person)	_ at t(Area	419-4099 Code & Daytime Telephone Number)		
Enclosed is a check for \$35.00 made payabl	e to the Flor	rida 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

## March 19 Mar

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Caroline Cornely [,	Tre hereby resign as	asurer
		(Title)
Belleair Beach Community Foundation		
	ne of Corporation)	
ct2e044 (Document Number, if known)	, a corporation organized unde	r the laws of the State of
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 PO Box 6327 Tallahassee, Florida 32314