

N23000006660

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

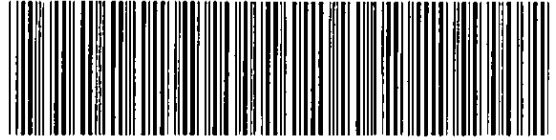
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700411274357

F

06/28/23--01017--001 **35.00

S. CHATHAM
AUG 12 2023

2023 JUL 28 AM 7:47
S. CHATHAM

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ISOLA ARTS INC

(Name of Corporation)

DOCUMENT NUMBER: N23000006660

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

GRACE M LUTTRELL

(Name of Person)

(Name of Firm/Company)

398 TIPTON ROAD SW

(Address)

PALM BAY, FLORIDA 32908

(City/State and Zip Code)

For further information concerning this matter, please call:

GRACE M LUTTRELL

(Name of Person)

at (321) 301-7646

(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:

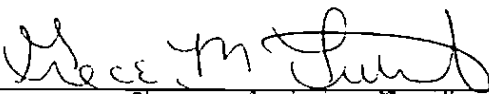
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, GRACE M LUTTRELL, hereby resign as DIRECTOR
(Title)

of ISOLA ARTS INC
(Name of Corporation)

N23000006660, 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 JUN 28 AM 7:47
FILED