N37783

(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:

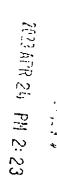
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TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Wellington B Condo. ASSOC. Inc.
DOCUMENT NUMBER: N37783
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Eve Marciniszyn (Name of Person)
Wellington B Condo. ASSOC Inc. (Name of Firm/Company)
311 Wellington B
W. Palm Beach, FL. 33417 (City/State and Zip Code)
For further information concerning this matter, please call:
Eve Marciniszyn at (561) 352-8903 (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

TO: Amendment Section

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. Eye Marciniszyn hereby resign as Directo	うと itle)		
of Wellington B Condo, Assoc. Inc.		,	
Name of Corporation) N 3 7 7 8 3 (Document Number, if known) a corporation organized under the laws of the	State of		
Florida			
B. H.	3. 4	2023 APR 24	**** ****
(Signature of resigning officer/director)	÷	PR 24	, in the second
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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