

N195000001093

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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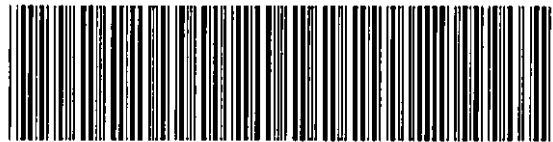
(Business Entity Name)

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DATE: 4/4/2022

NAME: WOOLBRIGHT PLACE MASTER ASSOCIATION, INC.

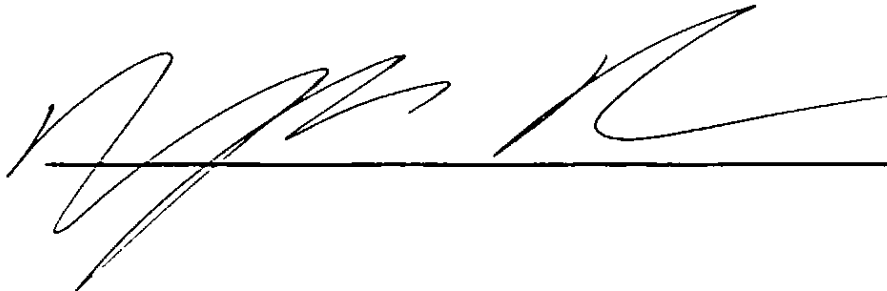
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AUTHORIZATION: ABBIE/PAUL HODGE




**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Jenissa Mohammed, hereby resign as Secretary & Director
(Title)

of Woolbright Place Master Association, Inc.
(Name of Corporation)

N95000001093, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

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FILING FEE IS \$35.00

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Amendment Section
Division of Corporations
P.O. Box 6327
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