PO10000 58675

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Mr. Fuzz,

TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Bayview Courseling + Wellings Center, I (Name of Corporation) DOCUMENT NUMBER: POIODOD 58675
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Person)
Bayview Counsaling + Wellness Center, Inc. (Name of Firm/Company)
221 NE 15th St. (Address)
Delray Beach FZ 33444 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (501) 706-8978 (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

Amendment Section

TO:

Street Address: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I	Tami Overbury hereby resign as President (Tille)	
of_	Bayview Ourscling + Wellness Center	, I
	(Document Number, if known) a corporation organized under the laws of the State of	
	Florida	
	SECRILIAND VOLUMENT AND TAILS TAILS TO Signature of resigning officer/directors. FL	

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