## P01000120684

(R	Requestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #/	)
PICK-UP	☐ WAIT	MAIL
(B	Business Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	o Filing Officer:	
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Office Use Only



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Room MAY 32 Rib



## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Munatee Mobile Murine, Inc. (Name of Corporation)
DOCUMENT NUMBER:
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Debra Corda (Name of Person)
Manatee Mobile Marine, Inc. (Name of Firm/Company)
3806 US 41 N (Address)
Palmetto, PL 34221 (City/State and Zip Code)
For further information concerning this matter, please call:
Pay Cor da at (941) 722-1980  (Name of Person) at (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	Debra Corda, hereby resign as President
	(Title)
of	Manatee Mobile Marine, Inc.
	(Name of Corporation)
	, a corporation organized under the laws of the State of (Document Number, if known)
	Coly Gody
	(Signature of resigning officer/director)

## FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to: LORIDA

Amendment Section
Division of Corporations

P.O. Box 6327 Tallahassee, Florida 32314