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(Re	equestor's Name)	
(Ac	ldress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: OAK STREET REALTY (Name of Corporation)
DOCUMENT NUMBER: PO30000 2895
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)
OAK STREET REALTY GRP. (Name of Firm/Company)
2661 COLLEGE ST (Address)
JACKSONVILLE, FL 32204 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (904) 389-4344 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, GUNILLA CRAVEN, hereby resign as SECRETARY TREASURE	R
of OAK STREET REALTY GORP. (Name of Corporation)	
(Document Number, if known), a corporation organized under the laws of the State of	
FLORIDA.	
(Signature of resigning officer/director) FILING FEE IS \$35.00	
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