

P04000050859

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP. ☐ WAIT ☐ MAIL

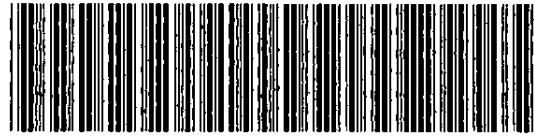
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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@ 6/30/08

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** RAMSINGH & BALDWIN, P.A.  
(Name of Corporation)

**DOCUMENT NUMBER:** P04000050859

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

NATASHA RAMSINGH  
(Name of Person)

RAMSINGH & BALDWIN, P.A.  
(Name of Firm/Company)

5356 NW MIMS CT.  
(Address)

PORT ST. LUCIE, FL 34986  
(City/State and Zip Code)

For further information concerning this matter, please call:

NATASHA RAMSINGH at ( 772 ) 924 8888  
(Name of Person) (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  
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, NATASHA N. RAMSINGH hereby resign as DIRECTOR  
(Title)

of RAMSINGH & BALDWIN, P.A.  
(Name of Corporation)

P04000050859, a corporation organized under the laws of the State of  
(Document Number, if known)  
FLORIDA

Natasha N. Ramsingh  
(Signature of resigning officer/director)

**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

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