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(Re	equestor's Name)	.
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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OFF. Resign.

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TRANSMITTAL LETTER

Division of Corporations
SUBJECT: BAY COAST REALTY INC. (Name of Corporation)
DOCUMENT NUMBER:
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jessica A. CARDENAS (Name of Person)
Bay Coast Reacty Two. (Name of Firm/Company)
5511 TERRAIN DE GOIF Dr. (Address)
LOTZ (City/State and Zip Code).
For further information concerning this matter, please call:
SSICA A CARDENAS at (813), 767 - 0686. (Name of Person) (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

TO: Amendment Section

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

of BAY COAST Really Two.	SIDENT.
(Name of Corporation) (Name of Corporation) (Document Number, u provide) (Document Number, u provide)	State of
Jignature of resigning officer/director)	
FILING FEE IS \$35.00	04 NOV -5 SECRETARY TALLARIASS
Make checks payable to Florida Department of State and mail to:	PH 1:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314