

P05000020539

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FL

0112 Resignation

APR 28 2023

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ODE & SONS CORP

(Name of Corporation)

DOCUMENT NUMBER: P05000020539

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

SEBASTIAN ANDRES ODE

(Name of Person)

ODE & SONS CORP

(Name of Firm/Company)

PO BOX 990205

(Address)

NAPLES FL 34116

(City/State and Zip Code)

For further information concerning this matter, please call:

SEBASTIAN ANDRES ODE

(Name of Person)

at (239) 331-0139

(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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

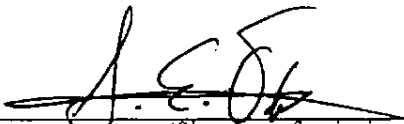
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SECRETARY OF STATE
TALLAHASSEE, FL

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, SEBASTIAN EUGENIO ODE, hereby resign as V
(Title)

of ODE & SONS CORP
(Name of Corporation)

P05000020539, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA


(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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2023 FEB 14 AM 10:06
SECRETARY OF THE
TREASURY