

PO50001 44750

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

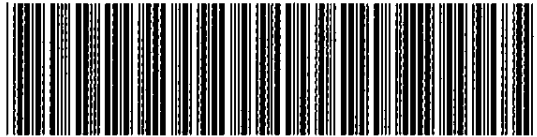
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

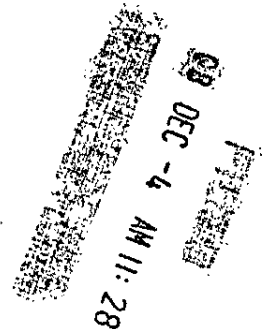
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2016/15

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Ocean Breeze Cooling Incorporated  
(Name of Corporation)

**DOCUMENT NUMBER:** P05000144750

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

Please return all correspondence concerning this matter to the following:

Michelle Reynolds

(Name of Person)

Ocean Breeze Cooling, Inc

(Name of Firm/Company)

2182 SE Bowie St

(Address)

Port St. Lucie, FL 34952

(City/State and Zip Code)

For further information concerning this matter, please call:

Melissa Rizzo

(Name of Person)

at ( 772 ) 398-8011

(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

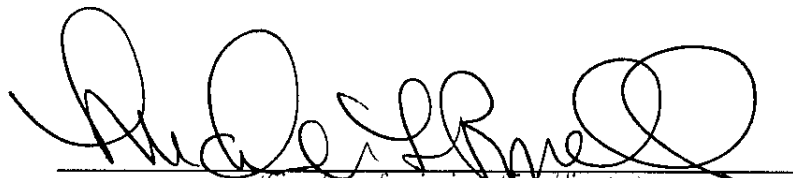
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Michelle Reynolds, hereby resign as Treasurer  
(Title)

of Ocean Breeze cooling, Inc.  
(Name of Corporation)

P05000144750, 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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