

P0700000 1698

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

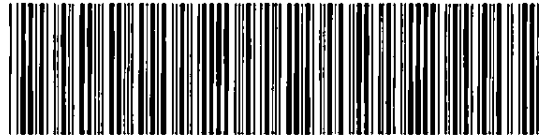
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2024 APR 15 PM 1:51  
J. HORNE  
MAY - 1 2024

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: The Brown Law Offices P.A.  
(Name of Corporation)

DOCUMENT NUMBER: P070000011698

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

Kari Brown  
(Name of Person)

2018 E 4th Avenue  
(Name of Firm/Company)

\_\_\_\_\_  
(Address)

Tampa FL 33605  
(City/State and Zip Code)

For further information concerning this matter, please call:

Kari Brown at ( 813 ) 267-3435  
(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

**Street Address:**

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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

**FILED**

**2024 APR 15 PM 1:52**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

I, Christopher E. Brown, hereby resign as Director  
(Title)

of The Brown Law Offices P.A.  
(Name of Corporation)

P07000001698, 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