## P07000003315

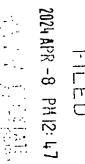
(Re	equestor's Name)		
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## TRANSMITTAL LETTER

**TO:** Amendment Section Division of Corporations

Gulf Coast Pools, Inc SUBJECT:		
SUBJECT:	(Name of Co	orporation)
DOCUMENT NUMBER: P07000063315		
The enclosed Officer/Director Resignation	for a Corpor	ation and fee are submitted for filing.
Please return all correspondence concerning	g this matter	to the following:
Steven Rivera		
(Name of Person)	<u> </u>	<del></del>
Gulf Coast Pools, Inc		
(Name of Firm/Company)	<u>.</u>	<del></del>
8880 Cascade Price Circle		
(Address)		<del></del>
North Fort Myers, FL 33917		
(City/State and Zip Code)		
For further information concerning this ma	itter, please c	all:
Steven Rivera	at (	322-9713 Code & Daytime Telephone Number)
(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 FILED FOR A CORPORATION 2024 APR -8 PH 12: 48

Tara A Rivera	Vice President, hereby resign as	
1,	, licitory resign as	(Title)
Gulf Coast Pools, Inc. of		
Na (Na	me of Corporation)	
P07000063315	, a corporation organized under the laws of	the State of
(Document Number, if known)		
Florida		
	<del></del> .	
1	ara a. Rivera	
	(Signature of resigning officer/director)	<del></del>

### **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