

PD80000082077

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

(Business Entity Name)

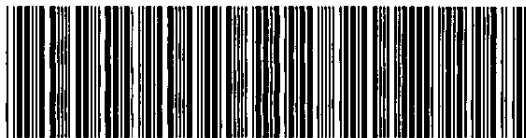
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@ 11/12/09

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ONE Square 1 of Sarasota 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:

William E. Matthies

\_\_\_\_\_  
(Name of Person)

ONE  
Square 1 of Sarasota Inc

\_\_\_\_\_  
(Name of Firm/Company)

75 South Palm Ave

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

Sarasota, FL 34236

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

William Matthies

\_\_\_\_\_  
(Name of Person)

at ( 941 ) 366-0451

\_\_\_\_\_  
(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:**

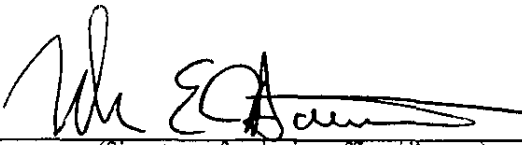
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, William E. Matthies, hereby resign as Director  
(Title)

of one Square 1 of Sarasota Inc  
(Name of Corporation)

PO800082077, 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

FILED  
STATE  
SECRETARY OF FLORIDA  
TALLAHASSEE  
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